M11000000235

(Requestor's Name)					
(Address)					
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(City	/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bus	siness Entity Nar	me)			
(Doc	cument Number)				
Certified Copies	Certificates	s of Status			
Special Instructions to Filing Officer:					





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2. Alegae

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 197205 7199649

AUTHORIZATION :

COST LIMIT : \$/25.00

ORDER DATE: June 29, 2016

ORDER TIME : 12:36 PM

ORDER NO. : 197205-005

CUSTOMER NO: 7199649

FOREIGN FILINGS

NAME: MCCALLA RAYMER, LLC

(CORPORAT	ľE							
]	LIMITED	PART	NERSHI	ĮΡ					
XX	LIMITED	LIAE	BILITY	COME	YNAS	7			
XXXX A	MENDMENT	r							
PLEASE	RETURN	THE	FOLLOW	VING	AS	PROOF	OF	FILING	:
	_ CERTII	FIED	COPY						
XX	_ PLAIN	STAN	MPED CO	PY					
	_ CERTIE	TICAT	E OF G	COOE	STA	NDING			

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

	tration Section fon of Corporations			
SUBJECT:	McCalla Raymer, LL0		·····	
	Name of Foreign I	Limited Liab	ility Compa	ny
Dear Sir or M	ladam:			
The enclosed	application, certificate and fee(s) are	submitted f	for filing.	
Please return	all correspondence concerning this r	natter to the	following:	
David R	. Yates			
	Name of Person			
Hunton	& Williams LLP			
	Firm/Company			
600 PEAC	CHTREE STREET, NE, SU	ITE 4100)	
	Address		_	
Atlanta,	GA 30308			
	City/State and Zip Code		_	
dyates@	hunton.com			
	ress: (to be used for future annual re	port notifica	tion)	
For further in	formation concerning this matter, ple	ease call:		
David R		.,404	, 888-4	1238
	Name of Person	Area Code	e & Daytime	Telephone Number
Regis Divisi Clifto 2661	EET/COURIER ADDRESS: tration Section ion of Corporations on Building Executive Center Circle hassee, Florida 32301		Registra Division P.O. Box	NG ADDRESS: tion Section of Corporations x 6327 see, Florida 32314
Enclosed is a \$25 Filing CR2E055 (9/15)	Certificate of Status	S55 Fili Certific	ng Fee & ed Copy	\$60 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the re-	ecords of the Florid	a Department of		
State: McCalla Raymer, LLC				
Enter new principal office address, if applicable:				
(<u>Principal office address</u> MUST BE A STREET ADDRESS)		77 0		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
2. The Florida document number of this limited liability com	npany is: M1100	0002235		
3. Jurisdiction of its organization: Georgia	··· · · · · · · · · · · · · · · · · ·			
4. Date authorized to do business in Florida: 05/04/201	1			
	'Limited Liability C	Company, ""L.L.C.," or "LLC.")		
If name unavailable, enter alternate name adopted for the purpopy of the written consent of the managers or managing menust contain "Limited Liability Company," "L.L.C." or "LL.C."	mbers adopting the	g business in Florida and attach a alternate name. The alternate name		
o. If amending the registered agent and/or registered officer a egistered agent and/or the new registered office address here	address on our reco	rds, enter the name of the new		
Name of New Registered Agent:				
New Registered Office Address:	Enter Flor	ida Street Address		
	, Florida			
	City	Zip Code		
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent and agrouped he provisions of all statutes relative to the proper and compired accept the obligations of my position as registered agent document is being filed to merely reflect a change in the reginality company has been notified in writing of this change.	ee to act in this cap lete performance of t as provided for in stered office addres	my duties, and I am familiar with Chapter 605, F.S. Or. if this		

8. If the amendment of	changes person, title or capacity in	accordance with 605.0902 (1)(e), indicate	that change:
Title/ Capacity	<u>Name</u>	Address	Type of Action
			Add
		·	Remov
		 	Add
			Remov
<u> </u>			Add
			Remove
			Add
			Remove
			Add
0 4 4 4 4			Remove
aforementioned am	he law of which this entity is org	y the official having custody of records in	The 16 July 20 17 18 18 18 18 18 18 18 18 18 18 18 18 18
	David R. Yates /	Authorized Signatory Inted name of signee	

Filing Fee: \$25.00

Control Number: K502925

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF AMENDMENT NAME CHANGE

I, Brian P. Kemp, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

MCCALLA RAYMER, LLC a Domestic Limited Liability Company

has filed articles/certificate of amendment in the Office of the Secretary of State on 06/16/2016 changing its name to

McCalla Raymer Pierce, LLC a Domestic Limited Liability Company

and has paid the required fees as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said articles/ certificate of amendment.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on 06/24/2016



Brian P. Kemp Secretary of State

ARTICLES OF AMENDMENT

Electronically Filed
Secretary of State

Filing Date: 6/16/2016 1:08:28 PM

Ariideil · · ·

Business Name

: MCCALLA RAYMER, LLC

Control Number

: K502925

Article 2°

The date the articles of organization were filed was: 01/13/1995

Articles)

The entity hereby adopts an amendment to change its name to the following new business name:

New Business Name

: McCalla Raymer Pierce, LLC

Effective Date

: 06/16/2016

Authorizer Information ...

Authorizer Signature: David R Yates

Authorizer Title: Attorney In Fact

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