Division of Corporations Electronic Filing Cover Sheet

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(((H13000125920 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : AGI REGISTERED AGENTS, INC.

Account Number : I20000000205 Phone

: (305)416-6800

Fax Number

: (305)416-6811

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FG CONSULTING, LLC

Certificate of Status	0
Certified Copy	0
Page Count	,01 4
Estimated Charge	\$25.00

B. BOSTICK

JUN - 6 2013

COVER LETTER

(((H13000125920 3)))

TO:

Registration Section Division of Corporations

FG Consulting, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Diane M. Hernandez

Name of Person

Adams Gallinar, P.A.

Firm/Company

1000 Brickell Avenue, Suite 300

Miami, Florida 33131

City/State and Zip Code

dhernandez@agilaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Diane M. Hernandez

Name of Person

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status □\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) □\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(((H130001259203)))

PAGE 03/05

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FG Consulting, LLC			
(Name of the Limited	Liability Compar Florida Limited L	iv as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Li Florida document number L05000023246	iability Company	were filed on March 8, 2005	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	f the limited liabi	ility company here:	
The new name must be distinguishable and end wit "L.L.C."	th the words "Limit	ted Liability Company," the designation "l	LLC" or the abbreviation
Enter new principal offices address, if applic	able:		201 St
(Principal office address MUST BE A STREE			S S
			SE 5
Enter new mailing address, if applicable:			ma A
(Mailing address MAY BE A POST OFFICE)	BOX)		(a) (b) (c)
			28 20
B. If amending the registered agent and/or the new registered of Name of New Registered Agent:	Tice address here		the name of the new
New Registered Office Address:	1000 Bricke	ell Avenue, Suite 300	
		Enter Florida street add	tress
	Miami	, Florida <u>33</u>	3131
		City	Zip Code
New Registered Agent's Signature, if changing I	Registered Agent:		
I hereby accept the appointment as registere, the provisions of all statutes relative to the praccept the obligations of my position as registeing filed to merely reflect a change in the recompany has been notified in writing of this to	roper and compl stered agent as p registered office change.	ete performance of my duties, and I d provid <u>ed</u> for in Chapter 608, F.S. Or,	um familiar with and if this document is nited liability
	Page 1	ll l	00125920 3)))

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	Remir Femando Guardazzi	5900 SW 73 Street	Add
		Suite 301	Remove
		South Miami, FL 33143	
MGR	Remir Fernando Guardazzi	5900 SW 73 Street	Add
		Suite 301	Remove
		South Miami, FL 33143	
MGRM	Maria Lorena Gomez	5900 SW 73 Street	
		Suite 301	Remove
		South Miami, FL 33143	_
MGRM	Rafael Izquierdo	3011 SW 149th Avenue	Add
		Miami, FL 33185	Remove
MGR	Rafael Izquierdo	3011 SW 149th Avenue	Add
		Miami, FL 33185	Z Remove
			JUN -5 Add 8 Remove

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if	necessary.)
· · · · · · · · · · · · · · · · · · ·	
	
Dated June 5 , 2013	
Allauf-	
Signature of a member or authorized representative of a member Robert R. Adams, Authorized Signatory	
Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00

2013 JUN -5 AM 8: 28