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COVER LETTER

TO:

Tallahassee, FL 32314

TO:	Registration Section Division of Corpo	ion Prations				
SUBJI	ECT:	Ralston	Consulting,LLC			
		Name of Limi	ted Liability Company			
The en	closed Articles of Ar	nendment and fee(s) are sub	omitted for filing.			
Please	return all correspond	lence concerning this matter	to the following:			
			Kent S Raiston	· · · · · · · · · · · · · · · · · · ·	_	
			Name of Person			
			Firm/Company	· · · · · · · · · · · · · · · · · · ·	-	
			105 Annapolis Lane		SECR	7010 HAR 17
		Pont	e Vedra Beach, Fl 3208	82	HASS	Ä Γ Γ
			City/State and Zip Code	<i>J</i> Z	- EE, FE	
		E-mail address: (1	nt.ralston@yahoo.com o be used for future annual report	notification)	ORIDA	2: 02
For fur	ther information con-	cerning this matter, please c	all:		3	
	Kent Name of Po	S Raiston erson	at (904) Area Code & D	536-9101 aytime Telephone Numba	 er	
	ed is a check for the foot in the foot filing Fee	\$30.00 Filing Fee &	\$55.00 Filing Fee &	₹ \$60.00 Fi		0
		Certificate of Status	Certified Copy (additional copy is enc	losed) Certifie	ate of Status d Copy onal copy is e	
		G ADDRESS:		DURIER ADDRESS:		
		on Section of Corporations 6327	Registration S Division of C Clifton Buildi	orporations		

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Raiston Cons (Name of the Limited Liability Compan (A Florida Limited Liability Compan)	ulting, LLC y as it now appears ability Company)	on our records.)	,
The Articles of Organization for this Limited Liability Company	were filed on	10/15/2007	and assigned
Florida document number L07000105859			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:		
Ralston Property Ma			
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company	y," the designation "LL ≌	C" or the abbreviation
Enter new principal offices address, if applicable:		>	
(Principal office address MUST BE A STREET ADDRESS)		Lu. C	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		D	
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here		r records, <u>enter th</u>	e name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Ente	r Florida street addre	SS
	·	, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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 = Ma MGRM = I	anager Managing Member			
<u>Title</u>	Name		Address	Type of Action
				Add Remove
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		<u> </u>		Remove
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D. If amen	ding any other information	n, enter change(s	s) here: (Attach additional	sheets, if necessary.)
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Dated	March 14	, 2010	<u>) </u>	
		de		
	Signat		authorized representative of	a member
			ent S Raiston printed name of signee	

Page 2 of 2

Filing Fee: \$25.00