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AUG O 6 2014 BRUCE

COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: Brooke 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:

Peter M. Brooke, Esq.

Name of Person

Krinzman, Huss & Lubetsky, LLP

Firm/Company

800 Brickell Avenue, Suite 1501

Address

Miami, Florida 33131

City/State and Zip Code

pmb@khllaw.com

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

For further information concerning this matter, please call:

Peter M. Brooke, Esq.

305.854-9700

Name of Person

Area Code

Daytime Telephone Number

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Brooke Consulting LLC
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on August 24, 2010 and assigned Florida document number L10000088874
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
Brooke Consulting & Real Estate, LLC
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address: Enter Florida street address
, Florida
City Zip Code (Try
New Degistered Agent's Signature if changing Degistered 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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

<u>Title</u>	<u>Name</u>	Address	Type of Action	
MGR	Russell H. Brooke	808 Brickell Key Drive, #3003		
		Miami, Florida 33131	Remove	
			Add	
			□ Remove	
			🗅 Add	
			□ Remove	
			Add	
			Remove	
			Add To Ad	
			□ Remove	

D. If amending any other inform	ation, enter change(s) here: (Attach add	ditional sheets, if necessary.)
	•	
the date this document is filed by the F	e date of filing: not be prior to date of receipt or filed date and can lorida Department of State)	(optional) not be more than 90 days after
Dated July 29	2014	
	Signature of a member or authorized representa	tive of a member
Russell H. B		
	Typed or printed name of signe	e

Page 3 of 3

Filing Fee: \$25.00

