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Office Use Only



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SECRETARY OF STATE
DIVISION OF CORPORATION

COVER LETTER

		stration Sec sion of Corp								
SUBJEC		BRI Consult	ing, LLC							
SUBJEC	,1; <u> </u>	Name of Limited Liability Company								
The encl	osed	Articles of A	Amendment and fee(s) are sub-	mitted for filing.						
Please re	turn	all correspor	idence concerning this matter	to the following:						
			Brent Innocenzi							
			*	Name of Person	10 pd. 10 g.					
			Brent Ryan Innocenzi, PLI	LC .						
				Firm/Company						
			7211 Fairwood Ave							
	Address									
			New Port Richey, Fl 34653	3						
		•	****	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·					
	brent@orangeblossomrealty.com									
			E-mail address: (1	to be used for future annual report	notification)					
For furth	er in	formation co	ncerning this matter, please ca	all:						
Brent Inc	nocei	nzi		727 744-9382 at ()						
	•	Name of	Person	Area Code Day	time Telephone Number					
Enclosed	l is a	check for the	e following amount:							
\$25.0	00 Fi	ling 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

	<u> </u>
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L17000026361	were filed on February 3, 2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	vility company here:
Brent Ryan Innocenzi, PLLC	-
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7211 Fairwood Ave
Principal office address MUST BE A STREET ADDRESS)	New Port Richey, Fl 34653
Inter new mailing address, if applicable:	7211 Fairwood Ave
Mailing address MAY BE A POST OFFICE BOX)	New Port Richey, Fl 34653
3. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	
	_
Name of New Registered Agent:	
New Registered Office Address:	
New Registered Office Address:	Enter Florida street address
New Registered Office Address:	, Florida
New Registered Office Address:	, Florida

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

$\mathbf{AMBR} = A$	Authorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
	\		Add
			☐ Remove
			Change
			□ Add
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	-		NATO P
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			STATE CHARGE

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ctive date, if other than the date of filing: (option	-al)
ctive date, if other than the date of filing: (option effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after f	пат) iling.) Pursuant to 60
If the date inserted in this block does not meet the applicable statutory filing requirements, this	date will not be lis
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ecord specifies a delayed effective date, but not an effective time, at 12:01 a. e 90th day after the record is filed. d. March 16 Signature of a member or authorized representative of a member	
ecord specifies a delayed effective date, but not an effective time, at 12:01 a. e 90th day after the record is filed.	m. on the earl

Page 3 of 3

Filing Fee: \$25.00