

121000498534

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

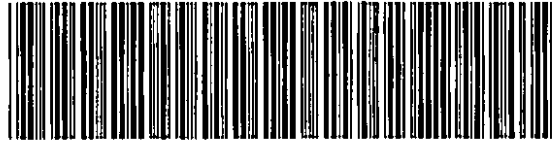
(Business Entity Name)

(Document Number)

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MAR 28 2022

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
22 MAR 28 PM 12:15

T. MATTHEWS

APR - 8 2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MSC CONSULTING FIRM, 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:

MOSES COHEN JR
Name of Person

MSC CONSULTING FIRM, LLC
Firm/Company

27031 BENTLEY WAY APT. 205
Address

WESLEY CHAPEL, FLORIDA 33544
City/State and Zip Code

msscconsultingfirm@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MOSES COHEN JR at (813) 625-3294
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 Address:
 Registration Section
 Division of Corporations
 The Centre of Tallahassee
 2415 N. Monroe Street, Suite 810
 Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
22 MAR 28 PM 12:15

MSC CONSULTING FIRM, 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 11/19/2021 and assigned
Florida document number L21000498534.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain 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

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

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AP	STEPHANIE COHEN	27031 BENTLEY WAY APT. 205	<input type="checkbox"/> Add
		WESLY CHAPEL . FLORIDA 33544	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	STEPHANNE COHEN	27031 BENTLEY WAY APT. 205	<input checked="" type="checkbox"/> Add
		WESLEY CHAPEL. FLORIDA 33544	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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