LA4000289939

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(City/State/Zip/Phone #)
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July 2, 2024

Registration Section Division of Corporations.

Please see attached amendment form completed for KOLBER CONSULTING GROUP LLC. The articles of organization were originally filed 6/27/2024 and L24000289939 is the document number. This is a single member LLC.

The only reason for the amendment was that I did not list myself as an authorized person and am submitting this form for that purpose.

A check is attached for \$55.00 for filing fee and certified copy.

Thank you

Morey J. Kolber

20910 via oleander #3

Boca Raton, Florida, 33428

954-610-1732

COVER LETTER

TO:	Registration Sec Division of Corp								
enn ir		CONSULTING GROUP LLC							
SUBJE	Name of Limited Liability Company								
The enc	losed Articles of /	Amendment and fee(s) are submitted for filing.							
Please re	eturn all correspor	ndence concerning this matter to the following:							
		Morey J. Kolber							
	losed Articles of Amendment and fee(s) are submitted for filing. eturn all correspondence concerning this matter to the following: Morey J. Kolber Name of Person KOLBER CONSULTING GROUP LLC Firm/Company 20910 via Oleander 3 Address Boca Raton, Florida, 33425 City/State and Zip Code moreykolber@gmail.com E-mail address: (to be used for future annual report notification) ner information concerning this matter, please call: 1. Kolber 954 610-1732 at ()								
		KÖLBER CONSULTING GROUP LLC							
		Firm/Company							
	Firm/Company 20910 via Oleander 3								
		Boca Raton, Florida, 33425							
		City/State and Zip Code							
		·							
		E-mail address: (to be used for future annual report notification)							
For furth	ner information co	oncerning this matter, please call:							
Morey .	J. Kolber	954 610-1732							
	Name of	f Person Area Code Daytime Telephone Number							
Enclosed	d is a check for the	ne following amount:							
■ \$ 25	.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status 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

KOLBER CONSULTING GROUP 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 6/27/2024 ____ and assigned 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 "LLC." 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

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

, 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 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Morey J. Kolber	20910 via oleander 3, Boca Raton Florida, 33428	= Add
			□Remove
			[] Change
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Tective date, if other than the	date of filing:		(ont	ional)	2
fective date, if other than the	st he specific and cannot be	prior to date of filing or	more than 90 days after	er filing.) Pursuant to 60	5.020
ote: If the date inserted in this becament's effective date on the D	ock does not meet the ap epartment of State's reco	ppiicable statutory ti ords.	ling requirements, th	us date will not be lis	
record specifies a delayed effective	ve date, but not an effecti	ive time, at 12:01 a.m	n, on the earlier of: (b) The 90th day afte	er the
is filed.		,		-, , , , , , , , , , , , , , , , ,	

T. 1 . 2 . 3	2024				
July 2nd	 `				
ated	· · · · · · · · · · · · · · · · · · ·				
ated	Signature of a member or	Hold .			

Filing Fee: \$25.00