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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$30,00 Filing Fee &

Certificate of Status

Street Address:

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Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

☐ \$60.00 Filing Fee.

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Certificate of Status &

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

JDC Consulting	Group LLC
(Name of the Limited Liability Compan (A Florida Limited Li	
The Articles of Organization for this Limited Liability Company v Florida document number	vere filed on and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liabilit	v 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)	200 East Robinson Street Suite 1120-H61 Orlando, FL 3280I
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>	200 East Robinson Street Suite 1120-H61 Orlando, FL 32801
B. If amending the registered agent and/or registered office adapted and/or the new registered office address here:	Idress on our records, enter the name of the new-registered
	Robinson Street Suite: 1120-461
O-land	Florida 32801 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, Signiture 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>	Type of Action
MG-R	Jovier Carrasquillo	200 East Robinson Street	IAdd
		Suite 1120-HG1	□Remove
		Orlando, FL 32812	□Change
MGR	Javier Carraguillo	200 East Robinson Street	=\Add
		Suite 1120-461	🗆 Remove
		Orlando, FL 32801	X Change
AMBR	Delisane) L. Carrasquille	200 East Robinson Street	= Add
		Suite 1120-461	⊟Remove
		Orlando, FL 32812	TChange
AMBR_	Delisaned L. Carrasquillo	200 East Robinson Street	⊒∆dd
		Suite 1120-461	🗆 Remove
		Orlando, FL 32807	\(\times\) Change
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is filed.								
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