## M0500003574

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## **COVER LETTER**

	istration Se ision of Cor			
SURIFCT	Shipley Co	nsulting Group, LLC		
30 <b>00</b> 00		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Brian Shipley		
		<del> </del>	Name of Person	
		Shipley Consulting Group,	LLC	
			Firm/Company	<del></del>
		146 Kensington Way		
			Address	· · ·
		Royal Palm Beach, FL 334	114	
		bshipleyseg@icloud.com	City/State and Zip Code	
		E-mail address: (	to be used for future annual report notif	ication)
For further in	formation c	oncerning this matter, please ea	all:	
Brian Shiple	у		561 281-6990 at ( )	
	Name o	f Person	Area Code Daytime	: Telephone Number
Enclosed is a	check for th	ne following amount:		
\$25.00 Fi	iling 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

Shipley Consulting Group, LLC		
(Name of the Limi	ted Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited L	iability Company were filed on $\frac{067}{2}$	23/2005 and assigned
Florida document number M05000003574	·	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company her	<u>.e</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," the de	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli-	cable:	<b>3</b>
(Principal office address MUST BE A STREI	ET ADDRESS)	SE SEC
		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Enter new mailing address, if applicable:	<u> </u>	
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	<u> </u>
	- · · · ·	
B. If amending the registered agent and registered agent and/or the new registered o		our records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	146 Kensington Way	
- ·- <del>- · · · · · ·</del>	Enter Flori	la street address
	Royal Palm Beach	, Florida _ <sup>33414</sup>
	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>	Address	Type of Action
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			☐ Remove
			☐ Change
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ective date, if other than the date of filing:	(optional)
te: If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	days after filing.) Pursuant to 605.0
record specifies a delayed effective date, but not an effective time, at the 90th day after the record is filed.	12:01 a.m. on the earlier
ed <u>SEPTEMIBER 14. 2818.</u>	
Willes Andrew	

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Filing Fee: \$25.00