# 112000094008

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2013 JUL 29 AM 9:31 State (35 of State Act of (35 for 1) or 10.

J. SAULSBERRY EXAMINER

JUL 3 0 2013

## **COVER LETTER**

TO: Registration S Division of Co	
SUBJECT:	SOUTH POLE CONSULTING LL
	Name of Limited Liability Company
The enclosed Articles o	f Amendment and fee(s) are submitted for filing.
Please return all corresp	condence concerning this matter to the following:
	Name of Person
	Name of Person
	SOUTH POLE CONSULTING LLC Firm/Company
	Firm/Company
	1001 N. FEDERAL Huy Suine 307 Address
	Haurinie FL 33009 City/State and Zip Code
	Chystate and Zip code
	E-mail address: (to be used for future annual report notification)
For further information	E-mail address: (to be used for future annual report notification)  concerning this matter, please call:
TZJZEAT Name	concerning this matter, please call:    Daling S
Enclosed is a check for	the following amount:
□ \$25.00 Filing Fee	Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  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

SOUTH BUE CO	MSULTING LIC	
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v Florida document number <u>L12000094008</u> .	were 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 end with the words "Limite" L.L.C."	ed Liability Company," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:	1001 N. FEDERAL HWY	Mule Box
(Principal office address MUST BE A STREET ADDRESS)	HALLANDALE, FL, 33009	
		29 T
Enter new mailing address, if applicable:	1001 N. FEDERL HWY	SUME 307 .
(Mailing address MAY BE A POST OFFICE BOX)	HALLANDAUE, FL, 33009	$\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$
B. If amending the registered agent and/or registered office address here	ce address on our records, <u>enter</u> :	the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street a	ddrass
<del></del>	, Florida	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 608, 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MERM	MARIA M POMBO	7149 Bay M, APT #18	_ Add
		MIAMI ISEACH FL 33141	Remove
			Add
			Remove
			Add
		24 6 4 5 F F F F F F F F F F F F F F F F F F	Remove Zing Add Add Remove 3
			Remove
			Add
			Remove

. If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ted	July 23", 2013
	Qui. Maz
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 JUL 29 AM 9: 3

### 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000094008

Entity Name: SOUTH POLE CONSULTING LLC

**Current Principal Place of Business:** 

7149 BAY DR # 18

MIAMI BEACH, FL 33141

**Current Mailing Address:** 

7149 BAY DR # 18 MIAMI BEACH, FL 33141

FEI Number: 46-0611894

Certificate of Status Desired: No

**FILED** Feb 11, 2013

Secretary of State

Name and Address of Current Registered Agent:

REALITY CHECK BUSINESS SOLUTIONS, LLC 1001 N FEDERAL HWY SUITE 307 HALLANDALE, FL 33009 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Manager/Member Detail Detail:

Title

MGRM

Title

**MGRM** 

Name

MORA, JULIO C

Name

POMBO, MARIA M

Address

7149 BAY DR # 18

Address

7149 BAY DR

City-State-Zip: MIAMI BEACH FL 33141

APT # 18

City-State-Zip:

MIAMI BEACH FL 33141

1 hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JULIO MORA

MGRM

02/11/2013