#10000001656

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K.SALY EXAMINER FEB 21 2014



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BOCA RATON FORT LAUDERDALE JACKSONVILLE KEY WEST LAKELAND

MELBOURNE MIAMI NAPLES ORLANDO TALLAHASSEE TAMPA

February 17, 2014

Florida Department of State **Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314

> Name Change Amendment and Reinstatement of Bridges Consulting Group, Re: LLC (doc# L0000001656)

Dear Sir or Madam:

We attempted to reinstate Bridges Consulting Group, LLC (the "LLC"); however, based on your enclosed email dated October 8, 2013, we cannot reinstate the LLC since the business entity name is no longer available. Therefore, pursuant to your instructions, also enclosed are the following items:

- 1. Original, signed Articles of Amendment to Articles of Organization for the LLC, changing its name to: Bridges of America - Bridges Consulting Group, LLC;
- 2. Original, signed Reinstatement for the LLC; and
- 3. Check number 369754 in the amount of \$957.50, to cover the reinstatement and amendment filing fees.

Please contact me if there is anything that would prevent these filings or if you have any questions.

Sincerely,

Peter R. Law, FRP

Florida Registered Paralegal

Enclosures

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2014 FEB 20 PM 1: 47
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

Bridges 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 L	iability Company were filed o	_n February 7, 2000	_ and assigned
Florida document number L0000001656	·	,	
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liability compa	ny here:	
Bridges of America - Bridges Consult	ting Group, LLC		
The new name must be distinguishable and end with "L.L.C."	th the words "Limited Liability	Company," the designation "LLC	or the abbreviation
Enter new principal offices address, if applic	able:	***************************************	
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable:			·
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and/ registered agent and/or the new registered of		s on our records, enter the	name of the new
Name of New Registered Agent:	William A. Boyles		
New Registered Office Address:	301 E. Pine St., Ste.	1400	
		Enter Florida street addres	NS .
_	Orlando	, Florida <u>328</u>	01
-	City		Zip Code
New Registered Agent's Signature, if changing I	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 Changing Registered Agent, Signature of New Registered Agent

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> Type of Action <u>Name</u> <u>Address</u> Remove Remove Remove Remove

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
Dated	January 30th, 2014.
	La Mataution Brown
	Signature of a member of authorized representative of a member
•	Lori Costantino-Brown, Managing Member
	Typed or printed name of signee
•	Page 3 of 3
٠.	Filing Fee: \$25.00