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(Re	equestor's Name)	,	
(Ad	ldress)		
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(Cit	ty/State/Zip/Phone	e #)	
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Special Instructions to	Filing Officer:		





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COVER LETTER

Division of Corporations		
SUBJECT: Genesis Insurance Group	LLC	
	mited Liability Company)	
The enclosed Articles of Amendment and fee(s) are su	bmitted for filing.	
Please return all correspondence concerning this matter	r to the following:	
Cesar F. Jara		
0	Name of Person)	
Genesis Insurance	Group LLC	
	Firm/Company)	
12261 SW 104 Te	rr	
	(Address)	
Miami, Florida 33	186-3612	
(City/	State and Zip Code)	
For further information concerning this matter, please of	sall:	fi Linealy
0	HASS T	Taxon San
Cesar F. Jara (Name of Person)	at (305) 338-1959 (Area Code & Daytime Telephone Numbér)	
(**************************************	(Area Code & Daytime Telephone Number) 35	i an
Enclosed is a check for the following amount:	, ***	
\$25.00 Filing Fee \$\sum \text{Certificate of Status}\$	\$55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MAILING ADDRESS:	STREET/COURIER ADDRESS:	

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

TO:

Registration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u> </u>	(Present Name) (A Florida Limited Liability Company)			
FIRST:	The Articles of Organization were filed on document number L02000006026 and assignment number L02000006026	gned		
SECOND:	This amendment is submitted to amend the following:			
	Name change from Genesis Insurance Group LLC to new	name_		
	Jara Consulting Group LLC. Due to Law suit of using the n	ame		
	Genesis Insurance. I am forced to change the name of m	y comp	any	
	to Jara Consulting Services LLC.			
		SEC	2007	
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		Es.		y H HEST Lyn
		CRIDA	35	•
Dated Ma	ay 8th			
	Com buil a		_	
	Signature of a member or authorized representative of a member			
	Cesar F. Jara			

Filing Fee: \$25.00

Typed or printed name of signee