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| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE
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COVER LETTER

| TO: Registration Se Division of Cor | | | | • | |
|--|---|---|------------------|--------------------------------|-----|
| SUBJECT: | ouise C. Brown, | Accountant, LLC | • | | |
| | Name of Lim | ited Liability Company | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | | | |
| Please return all correspond | ondence concerning this matter | to the following: | | | |
| | Louis | e C Brown Name of Person | · | | |
| | | | | | |
| | LouiseC | Brown Accountant | LLC | | |
| | | • | | | |
| | _ Trib Ca | tania Drive Address | | | |
| | 0 | Address | | | |
| | Loynton | Beach FL 334 | 1/2 | SEC SEC | |
| | 1 brow | Address Beach FL 334 City/State and Zip Code Un // C D be// South to be used for future annual report notificall: | h-net | DEC 31 PM | -17 |
| | E-mail address: (| to be used for future annual report notifi | ication) | <u>1963</u> | |
| For further information c | oncerning this matter, please c | all: | | 71. 22 71. 22 | |
| ho | UISE Brown | at (\frac{\sqrt{61}}{\text{Area Code}}) \frac{364}{\text{Daytime}} | 0364 | PA 5: 07 FINATE FILORIDA | |
| Name o | f Person | Area Code Daytime | Telephone Number | | |
| Enclosed is a check for the | ne following amount: | | | | |
| \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified | e of Status & | |

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

| LOUISE C. Brown, A | | |
|--|--|-------------------|
| (<u>Name of the Limited Liability Company</u> (A Florida Limited Liab | | |
| The Articles of Organization for this Limited Liability Company we Florida document number | ere filed on | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liability, L Brown Consulting, | LLC | |
| The new name must be distinguishable and contain the words "Limited Liability | | |
| Enter new principal offices address, if applicable: | Trib Catania D. | <u>;/</u> |
| (Principal office address MUST BE A STREET ADDRESS) | Bounton Beach F | -6 |
| | / (334 | フレ |
| Enter new mailing address, if applicable: | Same as a. | bove |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | Pr | ກ່ ປາ ວ |
| B. If amending the registered agent and/or registered office | In the state of th | H T |
| registered agent and/or the new registered office address here: | | |
| Name of New Registered Agent: | | ≥ \(\alpha\) |
| New Paristand Office Address | | 新 9 |
| New Registered Office Address: | Enter Florida street address | |
| | , Florida | |
| | 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

| MGR = M | from our records: Ianager Authorized Member | | |
|----------|---|---------------------------------------|---|
| <u> </u> | <u>Name</u> | Address | Type of Action |
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| fan effective d <u>Note:</u> If the o | e, if other than the date ate is listed, the date must be speate inserted in this block doffective date on the Departm | ecific and c es not me | annot be pri | licable stat | filing or mor | e than 90 day | (optional s after filings, this date | g.) Pursuant to 6 | 605.0207 isted as |
| e record s | pecifies a delayed effe day after the record is | filed. | | | | | | on the ear | rlier of |
| The 90th | | ? ~ | 0 | , | | | | | |
| The 90th | December 2 | 8 , | 2015 | <u> </u> | | | | | |
| The 90th Dated | December 2 | 8 D IUSE | 2015 CB | rowr | | | | | |

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Filing Fee: \$25.00