## 603000009012

(Re	equestor's Name)			
(Ac	idress)			
(Ac	idress)			
(Ci	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL.		
(Bu	usiness Entity Nam	ie)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to	Filing Officer:			





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## TRANSMITTAL LETTER

TO: Registration Sec Division of Corp					
SUBJECT: TRUST CO	ONSULTING & VENTURES	SLLC			
	(Name of Li	mited Liability Company)			
	Amendment and fee(s) are sul	-			
E	MILIAN BUCATARU				
_	(	Name of Person)	<del></del>		
TRUST	CONSULTING & VENTU				
	(	Firm/Company)			
3468 BARI	NSTAPLE DRIVE			<b></b> -	
		(Address)			
TAL	LAHASSEE, FL 32317				
	(City	'State and Zip Code)		ATIASSI	- 1
For further information of	oncerning this matter, please	call:		OL CCT 13 PHID: 35	
EMILIAN BUC	ATARU	at (850 ) 656-	-7823	55 H	
	(Name of Person)		time Telephone Numb	er)	
Enclosed is a check for the	following amount:				
☑ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	Section 1 Section 2 Sectio	tatus &	

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

TRUST CONSULTING & VENTURES LLC

	(Present Name) (A Florida Limited Liability Company)		
FIRST:	The Articles of Organization were filed on MARCH 12, 2003 and assigned document number L03000009012		
SECOND:	The following amendment(s) to the Articles of Organization was/were adopted by the liability company:	limited	
ARTICLE II The street address 3468 BARNSTAPI TALLAHASSEE, F			
The mailing addre 3468 BARNSTAPI TALLAHASSEE, F	1 Miles Die Comment of the contract of the con	the a	ul let
ARTICLE III The name and Flo EMILIAN BUCATA 3468 BARNSTAPI TALLAHASSEE, F	ARU LE DRIVE	10.00 3 11.00	
Dated OCT	OBER 11 2004		
	Signature of a member or authorized representative of a member  EMILIAN BUCATARU		
	Typed or printed name of signce		

Filing Fee: \$25.00