L05 0000 02679

(Requestor's Name)
·
(Address)
(,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
, ,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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COVER LETTER

TO: Registration S . Division of Co			
COPENH	AGEN CONSULTING LLC		·
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
	JOHN MATTEIS		
		Name of Person	
	COPENHAGEN CONSU	LTING, INC	
		Firm/Company	•
	2424 N FEDERAL HWY	STE 203	
		Address	,
	BOCA RATON, FL. 3343	1	
		City/State and Zip Code	
	michael brown <drexeladvi (<="" address:="" e-mail="" td=""><td>sors@yahoo.com> to be used for future annual report notification)</td><td></td></drexeladvi>	sors@yahoo.com> to be used for future annual report notification)	
For further information	concerning this matter, please c	all:	
MICHAEL BROWN		561 715-8520	
Name	of Person	Area Code Daytime Telephone Number	
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ite of Status &
Mailing Addre Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303	310

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

were filed on 8/19/05	and assigned		
ility company here:			
ity Company," the designation "LLC	C" or the abbreviation "L.L.C."		
1141 S. ROGE	rs-Grie		
STE12 BOCA Rator	v, <i>fl</i> 33427		
Same as	a have D		
	- 3 - 3		
address on our records, <u>enter</u>	r the name of the new regist		
Enter Florida street addre	pec		
, F	lorida Zip Code		
	ility company here: lity Company," the designation "LLO 1141 S. ROGE STE 12 BOCA RADI Same as address on our records, enter Enter Florida street addre City		

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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

. MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
S	JOHN MATTEIS	2424 N FEDERAL HWY STE 203	□Add
		BOCA RATON, FL 33431	≣Remove
			□Change
			🗖 Add
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ar a result at at	7/27/20		(At N	
te: If the date inserted in this	ust be specific and cannot be prior block does not meet the application Department of State's records.	able statutory filing rec		.) Pursuant to 605.020
cord specifies a delayed effect s filed.	ive date, but not an effective ti	me, at 12:01 a.m. on th	ne earlier of: (b) Th	ne 90th day after the
	2020	<u> </u>		
ed	 ;			
ed Oll And	Macter			
ed Han	Martie Signature of a member or author	orized representative of a	member	