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TALLAHASSEE, FLORAGE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Amendment of address (Name of Limited Liability Company)	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Buekap Consulting, LLC (Firm/Company)	
3600 5. State Rd 7, Ste 319 (Address)	
MIVAMAN FL 33023 (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Person) at (954) 724-1015me (Area Code & Daytime Telephone Number)	25. C
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{Status} \text{\$\frac{1}{2}\$}\$\$ \$55.00 Filing Fee \$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \text{\$\frac{1}{2}\$}\$\$ \$60.00 Filing Fee, \$\text{Certified of Status & Certified Copy} \\ \text{(additional copy is enclosed)} \text{\$\frac{1}{2}\$}\$\$)

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

(Present Name)
(A Florida Limited Liability Company) FIRST: SECOND: This amendment is submitted to amend the following: owner Dated ignature of a member or authorized representative of a member

Filing Fee: \$25.00

Typed or printed name of signee