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SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
17 OCT 10 AM 9:12

M. MILLIGAN
OCT 12 2017.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CAG Consulting Services, LLC

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:

Paul Giovannetti

Name of Person

Firm/Company

2403 River Tree Circle

Address

Sanford, Florida 32771

City/State and Zip Code

pgiovannetti@commercialalliancegroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul Giovannetti

407 330-3062
at ()

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

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

SECRET
DIVISION OF CORPORATIONS
17 OCT 10 AM 9:12
(S.)

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Anthony Giovannetti	205 Avenue C, Ponte Verda 32802	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: October 9, 2017 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated October 9 2017

October 9, 2017

Handwritten signature MGR

Signature of a member of authorized n

Signature of a member or authorized representative of a member

Paul Giovannetti, Manager of CAG Manager Exchange, LLC, Manager of Consulting Services, LLC

Typed or printed name of signee

17 OCT 10 AM 9:12