

L06000093971

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(City/State/Zip/Phone #)

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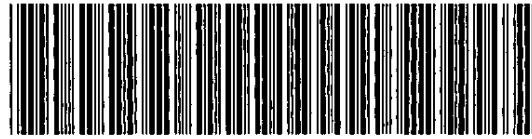
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TALLAHASSEE FLORIDA

N. O. ~~Design~~ AUG 19 2008

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: The Law Office of Rafael Gonzalez LLC (old)
Gonzalez Consulting, LLC (New)
(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:

Rafael Gonzalez
(Name of Person)
Gonzalez Consulting, LLC
(Firm/Company)
6309 Wild Orchid Drive
(Address)
Lithia, Florida 33547
(City/State and Zip Code)

For further information concerning this matter, please call:

Rafael Gonzalez at 813 967-7598
(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

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

The Law Office of Rafael Gonzalez, LLC

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

The Articles of Organization for this Limited Liability Company were filed on

9/26/06

Florida document number

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TALLAHASSEE FLORIDA

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Gonzalez Consulting, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

6309 Wild Orchid Drive
Lithia, Florida 33547

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6309 Wild Orchid Drive
Lithia, Florida 33547

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Rafael Gonzalez

New Registered Office Address:

6309 Wild Orchid Drive

(Enter Florida street address)

Lithia

Florida

33547

(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 608, 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.

Rafael Gonzalez
(If Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>No</u>	<u>Changes</u>		<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Amending Article III to indicate that the
purpose for which this Limited Liability Company
is organized is to provide consulting.

Dated

August 16, 2008.

Rafael Gonzalez
Signature of a member or authorized representative of a member

Rafael Gonzalez

Typed or printed name of signee

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TALLAHASSEE FLORIDA