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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT:   ## BUSINESS CONSULTANTS 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:
XEN GROSSEELD (Name of Person)
KIH BUSINESS CONSULTANTS (Firm/Company)
NORTH MINNI BEACH, FL 33/60 (City/State and Zip Code)
NoR1H Miani BEACH, FL 33/60 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (305) 389-055 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  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

FILED

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d 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 JAN 5, 2007 and assigned Florida document number <u>L 0 7 00000</u> 1824 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: EN GROSSIELO Name of New Registered Agent: 3 5 60 N.E. 170 STREET

(Enter Florida street address) New Registered Office Address: No RIH MIANI BEACH, Florida 33/60
(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.

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

<u>itle</u>	<u>Name</u>	<u>Address</u>	Type of Action
h GRM	TITAN BUSINESS CONSULTANTS	3460 NE 170 ST NORTH MAMI BARIS (	Add Remove
			Add Remove
<u>6km</u>	KEN GROSSFELD	3960 NE 170 STI NUMIH MIANI BERTH FL 33/60	Add Remove
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	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary	·,)
. If amendi			
D. If amendi			OR DEC 29 AH 8: SECRETARY AS A STANLINAL SERVICE AS A SER
	EC 20 2008,  TIMO BUSINESS CAN Signature of a member of		C 29 AH

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:

Page 2 of 2

Filing Fee: \$25.00