# 100015073

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**EXAMINER** 



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SECRETARY OF SHALE DIVISION OF CORPORATION

# **COVER LETTER**

Division of Corp	porations		
SUBJECT:	The Braintru		····
	Name of Limi	ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	Ka	therine S Walterhouse	
		Name of Person	<del></del>
	-4°6 E	Project Croup II C	
	The E	Braintrust Group LLC Firm/Company	
		Timer company	
	1630	Myrtle Lake Hills Road	
	· · · · · · · · · · · · · · · · · ·	Address	
	1	anguaged EL 20750	
		Longwood, FL 32750  City/State and Zip Code	<del> </del>
	E-mail address: (1	terhousek@gmail.com to be used for future annual report notific	cation)
For further information co	ncerning this matter, please c	all:	
Tot future information co	nicerning this matter, please c	an.	
Katherine	e S Walterhouse	at (_407 ){	330-7754
Name of	Person	Area Code & Daytime	Telephone Number
Enclosed is a check for the	e following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section

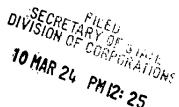
TO:

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 Brain	ntrust Group LLC		- <b>2</b> 5
( <u>Name of the Limited Liabili</u> (A Florida	y Company as it now appea	ırs on our records.)	
(A Florida	Ennuel Liability Company)		
The Articles of Organization for this Limited Liability	Company were filed on	Feb 8, 2007	and assigned
Florida document number L0700015013	<u> </u>		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company he	<u>re</u> :	
The new name must be distinguishable and end with the wo	ords "Limited Liability Comp	any," the designation "L	C" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS).		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	<del></del>		
B. If amending the registered agent and/or regis		our records, <u>enter th</u>	e name of the new
registered agent and/or the new registered office add	<u>lress here</u> :		
Name of New Registered Agent:			
New Registered Office Address:			
	Er	nter Florida street addr	ess
		, Florida	
	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

### 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>Name</u> **Type of Action** <u>Title</u> <u>Address</u> MGRM Jasmine Burke 1779 Markham Glen Road ✓ Add Remove Longwood, Fl 32779 Donald Burke MGRM 1779 Markham Glen Road ✓ Add Remove Longwood, Fl 32779 \_ Add ☐ Add  $\square$ Add Remove  $\square$ Add Remove


2010

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

Dated \_\_\_\_\_

March 1

Signature of a member or authorized representative of a member

Katherine S Walterhouse

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00