## L07000062398

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## **COVER LETTER**

10:	Division of Co				
SUBJĖ	ст: На	lo Consulting &	Investments, LL	C.	
•					
The enci	losed Articles of	f Amendment and fee(s) are sub-	mitted for filing.		
Please re	eturn all corresp	ondence concerning this matter	to the following:		
		Heidi Wh	(Name of Person)		
		Halo Core	SULTING & Investi (Firm/Company)	ments	
		9609 90th	St. N. Suite 18	<u>වූ</u>	
		5t. Peterst	City/Seate and Zip Code)	SECRE	P 08 HAY
For furth	ner information	concerning this matter, please ca	all:	TARY ASSE	<sup>2</sup> =
Hei	H. When	of Person)	at ( <u>347</u> ) <u>424-28</u> (Area Code & Daytime 1	Telephone Number Number	ED PM 2: 40
Enclose	d is a check for	the following amount:			•
\$25.0	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 St Certified Copy (additional copy	tatus &

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

Holo Corsulting	DA & INV Liability Compan Florida Limited L	estments y as it now appears of ability Company)	, LLC. n our records.)		
The Articles of Organization for this Limited Lia Florida document number <u>LG70006</u>	ability Company 2398	were filed on	13/2007	and as	signed
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liabi	lity company here:			
The new name must be distinguishable and end with 'L.L.C."	the words "Limit	ed Liability Company,	" the designation "L	LC" or the	abbreviation
Enter new principal offices address, if applica	ble:				
(Principal office address MUST BE A STREE)			03K		
		AH <i>A</i>		<u>n</u>	
			\SSE	A 2 7 7 7 7	
Enter new mailing address, if applicable:		<u> </u>	<u> 무</u>	m	
(Mailing address MAY BE A POST OFFICE L		-LORID	<u>3</u> <del>1</del>		
				H to	
B. If amending the registered agent and/o registered agent and/or the new registered off  Name of New Registered Agent:			records, enter t	he name	of the new
New Registered Office Address:	460A 49	# 51. N. S	Suite 123	•	
	<u> </u>	th St. N. S (Enter	r Florida street add	dress)	
	51. Pete		, Florida	3709 (Zip Co	de)

## 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 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> Name Address **Type of Action** Nancy N. George Jeffery A. Brogrove MGRM ☐ Add Remove MGRM ↑ Add Remove ☐ Add Remove Add ☐ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) a member or authorized representative of a member A. Wheeler
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00