## \_07000070707

(Re	equestor's Name)	<del></del>		
(Ac	idress)			
(Ac	idress)	<u> </u>		
(Cit	ty/State/Zip/Phone	#)		
PICK-UP	. WAIT	MAIL		
(Ві	usiness Entity Nam	e)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
		·		

Office Use Only



800136205808

09/24/08--01007--007 \*\*25.00

OR SECRETARY OF STATE OIVISION OF CORPORATIONS

J. BRYAN
SEP 25 2008
EXAMNER

## **COVER LETTER**

TO:

**Registration Section** 

Tallahassee, FL 32314

Division of Co	rporations			
SUBJECT: Austin	IT Consulting, L.L.C			
<del>- • •</del>	(Name of Lim	ited Liability Company)		
The enclosed Articles of	`Amendment and fee(s) are sub	mitted for filing		
		-		
Please return all correspondence	ondence concerning this matter	to the following:		
	Clinton E. Austin			
		(Name of Person)		
	Austin IT Consulting, L.L	.C		
		(Firm/Company)		
	2490 Pepper Dr		SE SE	
		(Address)	24	
	Navarre, FL 32566		PA O	
		(City/State and Zip Code)	12: RA	
For further information of	concerning this matter, please c	all:	OB SEP 24 PH 12: 56	
Audrey J. Austin		at ( 850 ) 417 - 8306		
(Name	of Person)	(Area Code & Daytime 1	Celephone Number)	
Enclosed is a check for t	the following amount:			
2 \$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)	
	JNG ADDRESS:	STREET/COURIER Registration Section	ADDRESS:	
Division of Corporations P.O. Box 6327		Division of Corporation Clifton Building	ons	

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OR SEP 24 PH 12: 56

Austin IT Consulting, L.L.C (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) July 25, 2007 The Articles of Organization for this Limited Liability Company were filed on and assigned L07000076707 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Austin IT Consulting, LLC 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: 2490 Pepper Dr (Principal office address MUST BE A STREET ADDRESS) Navarre, FL 32566 2490 Pepper Dr Enter new mailing address, if applicable: Navarre, FL 32566 (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: Name of New Registered Agent: 2490 Pepper Dr New Registered Office Address: (Enter Florida street address)

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.

(City)

Navarre

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

Florida 32566

(Zip Code)

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 Type of Action Title <u>Name</u> **Address** Presiden Clinton E. Austin 2490 Pepper Dr ■7 Add Remove Navarre, FL 32566 VP. Audrey J. Austin 2490 Pepper Dr Add Add Remove Navarre, FL 32566 MGRM **Brent Harris** 203 NE 39th Apt 203 \_p[7] Add Miami, FL 33137 Remove MGRM Sirderrick Jackson 1169 S.W 122nd Ave Pemproke Pines, FL 33025 ■ Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 22th . 2008 Signature of a member or authorized representative of a member Audrey J. Austin

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00