L08000017071

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(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
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(Document Number)				
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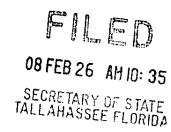
TO: Registration Section Division of Corporations					
SUBJECT: KTL CONSULTING, LLC					
(Name of Limited Liability Company)					
The enclosed Articles of Amendment and fee(s) are submit Please return all correspondence concerning this matter to	-				
Michelle Levy					
	(Name of Person)	-			
KTL Consulting					
	(Firm/Company)	_			
3645 NW 35 Street					
	(Address)	-			
Coconut Creek, FL 330	066				
. (C	City/State and Zip Code)	-			
For further information concerning this matter, please call:	e e e e e e e e e e e e e e e e e e e				
Michelle Levy	at (954) 975-0611				
(Name of Person)	(Area Code & Daytime Telephone Numb	er)			
Enclosed is a check for the following amount: \$\sumset\$\$\sumset\$	(additional copy is enclosed) Certifie	ate of Status &			
MAILING ADDRESS: Registration Section	STREET/COURIER ADDRESS: Registration Section				

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



M. Levy Investments, LLC	II. C.	
(A Florid	lity Company as it now appears on our da Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability	y Company were filed on 2/15/08	and assigned
Florida document number <u>L08000017071</u>		-
This amendment is submitted to amend the following	;	
A. If amending name, enter the new name of the l	imited liability company here:	
KTL Consulting, LLC		
The new name must be distinguishable and end with the 'L.L.C."	words "Limited Liability Company," the d	esignation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office a Name of New Registered Agent: New Registered Office Address:		rds, enter the name of the new
New Registered Office Address.	(Enter Florida street address)	
	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe	ered Agent:	
I hereby accept the appointment as registered age the provisions of all statutes relative to the proper accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this change	and complete performance of my du dagent as provided for in Chapter 60 ered office address, I hereby confirm	ities, and I am familiar with and 18, F.S. Or, if this document is
	(If Changing Registered Agent, Signate	ure 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 = M MGRM =	lanager • Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add
			Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If ame	nding any other information, enter change	e(s) here: (Attach additional sheets, if necessar	——— ¬v)
	g	(,,	
_			08 FE
_			
Dated	2-22,09	<u>~</u>	AMID: 35
	micheur	Levy	
	Michell	or authorized depresentative of a member	·
	Typed	or printed name of signee Page 2 of 2	·

Filing Fee: \$25.00