## L080000 28970

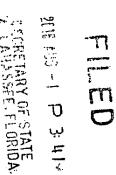
	(Requestor's Name)
	(Address)
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#MANAGE - Lon	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer;
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Office Use Only



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**S Warren** AUG 0 2 2016

## **COVER LETTER**

TO:	Registration Se Division of Cor		•	
SUBJE		ULTING AND HOLDINGS L	LC ·	
SUDJE		Name of Limi	ted Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	nitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		Angel Benitez		
			Name of Person	<del></del>
		ITM CONSULTING AND	HOLDINGS LLC	
			Firm/Company	
		300 S BISCAYNE BLVD	SUITE 812	
			Address	
		MIAMI, FL 33131		
			City/State and Zip Code	
		ABENITEZ107@GMAIL.C		
		E-mail address: (t	o be used for future annual report notific	cation)
For fur	ther information co	oncerning this matter, please ca	d1:	
ANGE	L BENITEZ	,	786 3972084 at ()	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	e following amount:		
\$25	5.00 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)

**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

ITM CONSULTING AND HOLDINGS LLC		
(Name of the Limited Liability (A Florida	Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on 05/09/2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limit</u>	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		The state of the s
(Principal office address MUST BE A STREET ADDR	ESS)	
Enter new mailing address, if applicable:		of STA
(Mailing address MAY BE A POST OFFICE BOX)		A # # # # # # # # # # # # # # # # # # #
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Floric	da
	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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR/1	Angel Benitez	300 S Biscayne Blvd Suite 812	■ Add
		Miami, FL 33131	□ Remove
			Change
<del></del>			Add
			□ Remove
		<u></u>	Add
			Remove
			☐ Change
			Add
			□ Remove
			Change
			□ Add
		· •	Remove  Change
			STAT Remove

D. If am	nending any other information, enter change(s) here: (Attach additional	sheets, if necessar	y.)
•			, <u>.</u>
,			
			<del> </del>
			······································
,			
(If an ei <u>Note:</u>	fective date, if other than the date of filing:    107/27/2016	(optional) han 90 days after filing quirements, this date	.) Pursuant to 605.0207 (
	ecord specifies a delayed effective date, but not an effective time e 90th day after the record is filed.	e, at 12:01 a.m.	on the earlier of:
Dated	d July 26th 2016	71 300 31 15 31 15 31 15	
	Signature Pramember or authorized representative of a	(1)	
	Angel Benitez  Typed or printed name of signee	<u> </u>	
			<u></u>
	Page 3 of 3	Þ	-

Filing Fee: \$25.00