

L08000029342

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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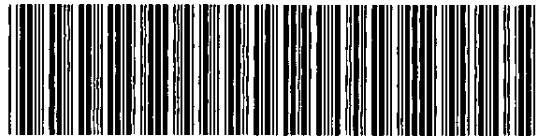
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

DEC 12 2008

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Core Consulting Group, LLC**  
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stephen P. Wood

(Name of Person)

(Firm/Company)

1751 Lake Baldwin Lane

(Address)

Orlando, FL 32814

(City/State and Zip Code)

For further information concerning this matter, please call:

Harry E. Harp, CPA

(Name of Person)

at ( 321 ) 251-7147

(Area Code & Daytime Telephone Number)

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Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

**Core Consulting Group, LLC**

**(Name of the Limited Liability Company as it now appears on our records.)**  
**(A Florida Limited Liability Company)**

The Articles of Organization for this Limited Liability Company were filed on 03/21/2008 and assigned Florida document number L08000029342

**This amendment is submitted to amend the following:**

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

**Enter new principal offices address, if applicable:**

304 E. Park Street

***(Principal office address MUST BE A STREET ADDRESS)***

Auburndale, FL 33823

**Enter new mailing address, if applicable:**

304 E. Park Street

***(Mailing address MAY BE A POST OFFICE BOX)***

Auburndale, FL 33823

**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:**

**New Registered Office Address:**

(Enter Florida street address)

\_\_\_\_\_, 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

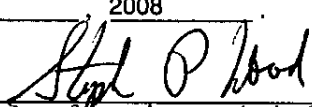
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Rick Barber	304 E. Park Street Auburndale, FL 33823	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Jack Myers	304 E. Park Street Auburndale, FL 33823	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Bill Singleton	304 E. Park Street Auburndale, FL 33823	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Rodger Anderson	304 E. Park Street Auburndale, FL 33823	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Tony Smothers	304 E. Park Street Auburndale, FL 33823	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated December 5

2008

  
\_\_\_\_\_  
Signature of member or authorized representative of a member

Stephen P. Wood

\_\_\_\_\_  
Typed or printed name of signee

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