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Ed and Sheila Crapo 17722 SE 59th ST Micanopy, FL 32667-3882	
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TEAM consul-	ting, LC
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company visiting document number 60800098819.	. 1 1
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company," the designation "LLC" or the abbreviatio
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address here: Name of New Registered Agent:	
	TAC SS
New Registered Office Address:	Enter Florida street address
	Florida SS
	City Mc Zin Code T
New Registered Agent's Signature, if changing Registered Agent:	FLORIE
I hereby accept the appointment as registered agent and agree	e to act in this capacity. I further agree to comply with

If Changing Registered Agent, Signature of New Registered Agent

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 **Title** <u>Name</u> **Address** Type of Action MGRM Edward A. Crapo **K**Add Remove ☐ Add Remove ☐ Add Remove ☐ Add Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 28 Signature of a member or authorized representative of a member Edward A. Coop Typed or printed name of signee

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Filing Fee: \$25.00