## L09000037908

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(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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VISION OF CORPORALIUMS

MAY - 7 2012 T. HAMPTON

## **COVER LETTER**

Division of C			سو.			
SUBJECT:	CONCEPCIONCO	DNSULTINGGROUP, L	LC			
	Name of Lin	ited Liability Company				
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.				
Please return all corres	pondence concerning this matte	r to the following:				
	F	RANCISCO A GOMEZ				
		Name of Person				
CONCEPCIONCONSULTINGGROUP, LLC						
Firm/Company						
	10983 NW 53 LANE					
	Address					
	DORAL, FL 33178					
City/State and Zip Code						
	g	omezfr@bellsouth.net				
		to be used for future annual report noti	fication)			
For further information	concerning this matter, please of	call:				
FRAN	CISCO A GOMEZ	at ( 305 )	322-6120			
Name of Person			ne Telephone Number			
Enclosed is a check for	the following amount:					
\$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)			

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**

CONCEPCIONCONSU	JLTINGGRO	OUP, LLC	_
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appea	ars on our records.)	
(A Florida Ellitted E	Diability Company)		- TENES
The Articles of Organization for this Limited Liability Company	were filed on	April 20, 2009	_ and assigned
Florida document number L09000037908			$\omega$
			그 사이
This amendment is submitted to amend the following:			12: 06
A. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :	
FINANCE FORENSICS & VAI	LUATION SER	VICES, LLC	
The new name must be distinguishable and end with the words "Limit	ited Liability Comp	any," the designation "LLO	C" or the abbreviation
"L.L.C."		1	
Enter new principal offices address, if applicable:	255 Aragon	Avenue, Znd Floor	
(Principal office address MUST BE A STREET ADDRESS)	Corar Cables	5, 1 lolida 55 154	
Enter new mailing address, if applicable:	255 Aragon /	2 Avenue, 2nd Floor	
(Mailing address MAY BE A POST OFFICE BOX)	Coral Gables	s, Florida 33134	
Training united training both training both		7	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:		our records, enter the	name of the new
New Registered Office Address:		4 FI 11 .44.11	
	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 by in Chapter 608, F.S. Or, if this accument is ebeby confirm that the limited trability being filed to merely reflect a change in the registered office address, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	CARLOS F CONCEPC	ON 355 ALHAMBRA CIRCLE, SUITE CORAL GABLES, FL 33134	1250
MGRM	CARLOS F CONCEPCI	ON 255 Aragon Avenue, 2nd Floor CORAL GABLES, FL 33134	Add ☐ Remove
			AddRemove
			Add Remove
			Add Remove
		<u>.</u>	AddRemove
D. If amend	ling any other information, ente	r change(s) here: (Attach additional sheets, if necess	n
			FILED FILERY OF CO.  12 HAY -3 FI
Dated	April 30	<u>2012</u> .	PM 12: 06
	Signature of a	member or authorized representative of a member FRANCISCO A GOMEZ	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00