

L09000066015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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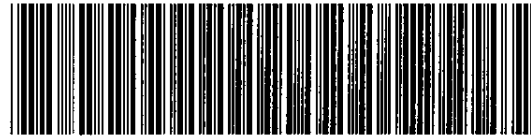
(Business Entity Name)

(Document Number)

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11 OCT -3 PM 12:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Culligan OCT -4 2011

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: M K BUSINESS CONSULTANTS 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:

KENNETH GROSSFELD  
Name of Person

M K BUSINESS CONSULTANTS LLC  
Firm/Company

3400 NE 170 ST  
Address

NORTH MIAMI BEACH, FL 33160  
City/State and Zip Code

TITAN BUSINESS 123 @ GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KENNETH GROSSFELD at (305) 705-4187  
Name of Person Area Code & Daytime 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

FILED

11 OCT -3 PM 12:24

MK BUSINESS CONSULTANTS LLC

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on July 8, 2009 and assigned  
Florida document number 209000066015

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3495 NE 163 ST.  
NORTH MIAMI BEACH  
FL, 33160

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3495 NE 163 ST  
NORTH MIAMI BEACH  
FL 33160

**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:

3495 NE 163 ST  
Enter Florida street address  
NORTH MIAMI BEACH, Florida 33160  
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>
MANAGING MEMBER	RICHARD GROSSFELD	3495 NE 163 ST. NORTH MIAMI BEACH FL 33160	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MANAGING MEMBER	JEFFREY ROSENBERG	3495 NE 163 ST NORTH MIAMI BEACH FL 33160	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input 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.)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dated SEPT 28, 2011

Jeffrey Rosenberg  
Signature of a member or authorized representative of a member

Richard Grossfeld - MANAGING MEMBER  
Typed or printed name of signee