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SECRETARY OF STATE
AND ANASSEE, FLORIDA

J. BRYAN

MAY 1 0 2010

EXAMINER

COVER LETTER

TO:	Registration Solution of Con				
SUBJE	СТ:		Consulting LLC		
		Name of Limi	ted Liability Company		
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please r	eturn all correspo	ondence concerning this matter	to the following:		
•		•	Brandon M. Brotsky		
			Name of Person		- Eg 5
		BRANEX Consulting LLC Firm/Company		FIL 10 MAY -5 SECRETAR SECRETAR SECRETAR	
		21.45 N		6	#0 = M
			145 NE 184th Street Unit 5106 Address		D A 2: 05 FELORID
		Ave	entura / Florida 33160		最高い
		Prondoné	City/State and Zip Code		
		E-mail address: (i	MortgageForensicsInc.c to be used for future annual report not	ification)	
For furt	her information of	concerning this matter, please of	call:		
		don M. Brotsky of Person	at (<u>954)</u> Area Code & Dayti	478-8366 me Telephone Numb	er
Enclose	d is a check for t	he following amount:			
\$ 25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclos	ed) Certifie	iling Fee, cate of Status & ed Copy onal copy is enclosed)
	Regist Divisi P.O. E	AING ADDRESS: ration Section on of Corporations Box 6327 assee, FL 32314	STREET/COUI Registration Section of Corp Division of Corp Clifton Building 2661 Executive of Tallahassee, FL	orations Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRANEX Cor	nsulting 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 on07/10/2009	and assigned			
Florida document number <u>L0900066801</u> .					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	oility company here:				
The new name must be distinguishable and end with the words "Limit" L.L.C."	ited Liability Company," the designation	"LLC" or the abbreviation			
Enter new principal offices address, if applicable:	3145 NE 184th Street	SECON TO			
(Principal office address MUST BE A STREET ADDRESS)	<u>Unit 5106</u>	7			
	Aventura, FL 33160	5 PH 2:			
Enter new mailing address, if applicable:	3145 NE 184th Street				
(Mailing address MAY BE A POST OFFICE BOX)	Unit 5106	Torri S			
	Aventura, FL 33160				
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	·	er the name of the new			
Name of New Registered Agent:					
New Registered Office Address: 3145 NE 18	4th Street Unit 5106 Enter Florida street o	address			
	Aventura, 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 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 = .N	Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add Remove
	<u> </u>		Add Remove
			AddRemove
	<u> </u>		Add Remove
			Add Remove
D. If amen	ding any other information	, enter change(s) here: (Attach additional	sheets, if necessary.)
			A CO
_			HAY -5 PA
Dated	May 3rd		M 2: 05 FSTATE FLORIDA
	Signatu	re of a member or authorized representative of	a member
		Brandon M. Brotsky Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00