Page 2 of 5 To: avision of Corporations



Division of Corporations Electronic Filing Cover Sheet

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LSM CONSULTING SERVICES, LLC

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Corporate Filing Menu

COVER LETTER

Division of Corporations	
SUBJECT: LSM CONSULTING SERVICES (Name of Lim	nited Liability Company)
The enclosed Articles of Amendment and fee(s) are sub	
Barbara Dang	(Name of Person)
Legalzoom.com, Inc.	(Firm/Company)
7083 Hollywood Blvd	d., Suite 180 (Address)
Los Angeles, CA 90	0028 (City/State and Zip Code)
For further information concerning this matter, please c	call:
Barbara Dang (Name of Person)	at (323) 962-8600 (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 & \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) \$40.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS:	STREET/COURIER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on 04/2 Florida document number L10000045766 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 Compan" L.L.C." B. If amending the registered agent and/or registered office address on our registered agent and/or the new registered office address here:	· •
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 Compan" L.L.C." B. If amending the registered agent and/or registered office address on our	
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 Compan" L.L.C." B. If amending the registered agent and/or registered office address on our	
The new name must be distinguishable and end with the words "Limited Liability Compan" L.L.C." B. If amending the registered agent and/or registered office address on ou	
"L.L.C." B. If amending the registered agent and/or registered office address on ou	
Name of New Registered Agent:	
New Registered Office Address: 1581 Brickell Ave., Ph-205	
(Ent	er Florida street address)
<u>Miami</u>	, Florida <u>33129</u>
(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

LSM CONSULTING SERVICES, LLC

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.

Page 1 of 2

MGR = Manager

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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:

<u>lç</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add
			Add Remove
			Add Remove
			Add Remove
	ling any other information, enter chang ticle V. The address of MGRM Lar	e(s) here: (Attach additional sheets, if necessary.)	_
	81 Brickell Ave Ph-205, Miami, Flo		
		pal office and the mailing address of the	
-	C shall be: 1581 Brickell Ave Ph-		
 ted	OCTOBER 05, 20	10.h.	
,	Signarupe of a member	or printed name of signee	

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Filing Fee: \$25.00