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2015 JUL -1 PM 2: 08

K. SALY EXAMINER JUL - 6 2015

## COVER LETTER.

Divisio	n of Corpo	rations			
	ingroup3 Co	onsulting, LLC			
30D0E011		Name of Limit	ed Liability Company		
The enclosed Ar	rticles of An	nendment and fee(s) are subm	itted for filing.		
Please return all	correspond	ence concerning this matter to	the following:		
		Elizabeth M. Zaffina			
		<del></del>	Name of Person		
		Sungroup3 (	cnsulting		
		•	Firm/Company		
		2150 72nd St. Cir. W.			
			Address		
		Bradenton. Fl. 34209			
			City/State and Zip Code		
		sungroup3@aol.com			
		E-mail address: (to	be used for future annual repo	rt notification)	
For further infor	mation cond	cerning this matter, please cal	<b>!</b> :		
Elizabeth Zaffir	ıa		941 761-36	514	
Name of Person at ()  Area Code Daytime Telephone Num		Paytime Telephone Number			
Enclosed is a ch	eck for the f	following amount:			
■ \$25.00 Filin	g Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	) Certified	te of Status &

TO:

Registration Section ..

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

2015 JUL -1 PH 2:08

Sungroup3 Consulting, 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 on 06/14/2010 and assigned Florida document number \_L10000063530 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Elizabeth M. Zaffina, LLC The new name must be distinguishable and contain 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) 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 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: Enter Florida street address , Florida

## 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 605, 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.

City

If Changing Registered Agent, Signature of New Registered Agent

2015 JUL - 1 PM 2: Type of Action

FALLAMASSEE, FI Applied Add If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: MGR = Manager AMBR = Authorized Member <u>Title</u> <u>Name</u> <u>Address</u> □ Remove ☐ Change □ Add ☐ Change □ Remove ☐ Change ☐ Remove \_□ Change □ Add □ Remove \_ Change \_□ Add □ Remove ☐ Change

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