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SECRETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporation			
SUDJECT.	Timothy You	ng Consulting, LLC	
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of An	nendment and fee(s) are sub	mitted for filing.	
Please return all corresponde	ence concerning this matter	to the following:	
		Timothy Young	
		Name of Person	
	Timoth	y Young Consulting, LLC	
		Firm/Company	
	68	31 Linville Falls Drive	
		Address	
	M	lelbourne FL 32904	
		City/State and Zip Code	• •
	t t	young3@cfl.rr.com o be used for future annual report noti	(Section)
		and the second second	irealion)
For further information cond	cerning this matter, please ca	ali:	
	thy Young	at (_321_)	952-5388
Name of Pe	erson	Area Code & Daytin	ne Telephone Number
Enclosed is a check for the f	following amount:		
\$25.00 Filing Fee [\$30.00 Filing Fee & Certificate of Status	☐\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		·	•
Registration of P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, FL 32314	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C	on orations

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Timol	thy Young Consulting, L	LC ers on our records.)	
(A)	Liability Company as it now appea Florida Limited Liability Company)	<u></u> /	
The Articles of Organization for this Limited Liz Florida document numberL10000078	• •	July 27, 2010	and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liability company he	<u>re</u> :	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Comp	any," the designation "LL	.C" or the abbreviation
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	(ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<u></u>		
B. If amending the registered agent and/o registered agent and/or the new registered off		our records, enter th	e name of the new
Name of New Registered Agent:	Waneece Young	<u>.</u>	~ }
New Registered Office Address:	681 Linville Falls Drive		SECR
	E	nter Florida street add	
	Melbourne	, Florida	32904 €
	City		gip C∰e Π
New Registered Agent's Signature, if changing R	egistered Agent:	C	
I hereby accept the appointment as registered the provisions of all statutes relative to the pracept the obligations of my position as regis being filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing the company has been nout the company has been notified in writing the company has been	oper and complete performance tered agent as provided for in C egistered office address, I hereb	e of my duties, and I are Chapter 608, F.S. Or, is by confirm that the limit	n familiar with and f this document is ited liability

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>	Address	Type of Action
MGRM	Timothy Young	681 Linville Falls Drive Melbourne FL 32904	Add Remove
			Add Remove
D. If amend	ling any other information, e	nter change(s) here: (Attach additional sheets, if necessary.)	
_			
	August 3	2010	
	Signature	•	
		Waneece Young Typed or printed name of signee	<u> </u>

Page 2 of 2

Filing Fee: \$25.00