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SECKETARY OF STATE
FALLAHASSEF FIORIN

B. BOSTICK

JAN 4 2011

EXAMINER

COVER LETTER

TO: Registration S ps Division of Co	Section orporations		
SURIFCT	mgf c	onsulting LLC	
	Name o	onsulting LLC of Limited Liability Company	
	of Amendment and fee(s) condence concerning this	·	
		Mary Fitzwilliam Name of Person	-
		mGF Consulting LLC Firm/Company	
		2856 NE 26th Street	
		Fort Landerdale, Florid	۵۵ ۵ ۶ ع
		Fort Landerdale, Florida City/State and Zip Code dress: (to be used for future annual report notification)	11 JA SECRI
For further information	concerning this matter, p	lease call:	
Name	of Person	at () Area Code & Daytime Telephone Numbe	5: 58
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee Certificate of St	(additional copy is enclosed) Certified	ate of Status &
MAII	LING 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

• -	= consultiv	. 1			
(<u>Name of the Limited L</u> (A F	iability Company as it i lorida Limited Liability	now appears on o Company)	our records.)		
The Articles of Organization for this Limited Liab	oility Company were fi	led on <u>Aug</u> i	15+ 27,2	Ol Ond as	signed
Florida document number	137.	J			
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of the	he limited liability cor	mpany here:			
The new name must be distinguishable and end with the "L.L.C."	the words "Limited Liab	ility Company," t	he designation "	'LLC" or the	abbreviation
Enter new principal offices address, if applicab	ole:				
(Principal office address MUST BE A STREET	ADDRESS)			<u>></u>	
			LAHAS	I A	VALUE OF THE PARTY
Enter new mailing address, if applicable:					m
(Mailing address MAY BE A POST OFFICE BO	<u> </u>			P.	Ü
			<u></u>	5: 58 STATE	
B. If amending the registered agent and/or registered agent and/or the new registered office		dress on our re	ecords, enter	the name o	of the new
Name of New Registered Agent:	Mary	Fitzw	illian	<u> </u>	
New Registered Office Address:	2856	Fitzu NE 26	th Stree	-+	_
		Enter Flo	orida street ad	dress	
	For+ Laud	erdale	, Florida	3330	5
				Zip Code	ષ
New Registered Agent's Signature, if changing Reg	gistered Agent:				

New Registered Agent's Signature, it 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> Name **Address** Type of Action Grant Fitzwilliam 2856 NE 26th Street HG RH ☐ Add fort Landerdale, FL Mary Fitzwilliam Remove ZUT Street HGKH 🔀 Add Remove 🔲 Add Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) 28 2010 Dated December Signature of a member or authorized representative of a member Grant Fitwilliam
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00