L10000127355

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(Address)	
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EXAMINER

COVER LETTER

	stration Se		s		,
· Divis	sion of Cor	rporations			
SUBJECT:		Public Safety Ta	aining Consultants LLC		
_			ted Liability Company		
					•
The enclosed	Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return a	all correspo	ondence concerning this matter	to the following:		
			Daniel E. Morgalo		
			Name of Person		
		Public Sa	fety Training Consultants	LLC	
			Firm/Company		
11442 SW 242 Lane		2 7			
			Address		A B T
		н	lomestead, FL. 33032		SSS G
			City/State and Zip Code		ा 🚉 🕿 📶
		E mail address: /	dk9taz@bellsouth.net to be used for future annual report not	ification	STAR D
For further int	formation o	concerning this matter, please o		meationy	
		,,,			
		niel Morgalo of Person	at (305)	335-5053 me Telephone Number	
		1103011	A the state of the state of		••
Enclosed is a	check for t	he following amount:			
\$25.00 Fil		\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified	te of Status &
	Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COUR Registration Sect Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	orations Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PUDIIC S (Name of the Limited)	Safety Tainin Liability Compa	g Consultants ny as it now appears	on our records.)		
(/	A Florida Limited L	Liability Company)				
The Articles of Organization for this Limited L	iability Company	were filed on	12/13/2010	and a	ssigned	
Florida document numberL1000012	7355					
This amendment is submitted to amend the foll	owing:					
A. If amending name, enter the new name o	f the limited liab	ility company here	:			
Public	Safety Training	g Consultants LL	.c			
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ted Liability Compan	y," the designation	on "LLC" or the	abbreviation	سار سور سور
Enter new principal offices address, if applic	able:	Not Applicable	1	TO HAR		•
(Principal office address MUST BE A STREE	ET ADDRESS)				- Chimma	
				SELLE SELLE		
Enter new mailing address, if applicable:		Not Applicable		FL BR		'
(Mailing address MAY BE A POST OFFICE BOX)				Dri V	·	
				·	:	
B. If amending the registered agent and/ registered agent and/or the new registered or			ır records, <u>ent</u>	er the name	of the new	
Name of New Registered Agent:	Not Applical	ble				
New Registered Office Address:	New Registered Office Address: Not Applicable			- <u>-</u>		
		Ente	r Florida street	address		
	, Florida					
		City		Zip Co	de	

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

	·Manager I = Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			☐ Add ☐ Remove
			Add Remove
			Add Remove
			Damaya
			□ Domosia
			Pamaya
D. If an	nending any other information, ento	er change(s) here: (Attach additional sheet.	is, if necessary.)
			12 Mar.
Dated	March 3rd	2012	SEE, FILORIDA
	Signature of	a member or authorized representative of a river	nber
		Daniel E. Morgalo Typed or printed name of signee	.

Page 2 of 2

Filing Fee: \$25.00