L10000131967

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COVER LETTER

TO:

Registration Section, Division of Corporations

SUBJECT:

Monaghan's Construction Consultants, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Douglas J. Mortellaro

Name of Person

Mortellaro & Quigley, CPA's, LLC

Firm/Company

278 Crystal Grove Blvd.

Address

Lutz, Florida 33548

City/State and Zip Code

dj.mortellaro@verizon.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Douglas J. Mortellaro

_{3,7}813₃909-4211

Name of Person

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 &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

Monaghan's Construction Consultant's, 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 Com	pany were filed on Decemb	per 29, 2010 and assigned
Florida document number L10000131967		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
A Fusion Management, LLC		
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Company," th	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	Same	
(Principal office address MUST BE A STREET ADDRES	<u>S)</u>	
		201 SE
		SAR JAN
Enter new mailing address, if applicable:	Same	SE N
(Mailing address MAY BE A POST OFFICE BOX)		<u>m</u> < ∞
		20 P
B. If amending the registered agent and/or registere		cords, enter the name of the new
registered agent and/or the new registered office address	here:	
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:		
	Enter Fla	orida street address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Degistered Ac	rant.	

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, 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
MGR	Mike Viscussi	708 6th Avenue NE	Add
		Largo, FL 33770	Remove
		-	
			Add
			Remove
			Add
		ALLMASS	Remove 2013 JAN 28
		HASSEE, FLORIDA	Add Add
		>>	Remove
			Add
			Remove
			Add
			Remove

D. If amending any other in	formation, enter change(s) here: (Attach additional sheets, if necessary.)
Dated January 24	2013
	Daniel Mondies
	Signature of member of authorized representative of a member
	Daniel J. Monaghan
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECNETARY DE STATE