

L11000016663

(Requestor's Name)

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(Address)

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2012 JAN 24 PM 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
JAN 25 2012
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 17, 2012

JOSEPH S. GILIBERTI, JR.
GILIBERTI CONSULTING, LLC
9781 ARBOR OAKS LANE APT 204
BOCA RATON, FL 33428

SUBJECT: GILIBERTI CONSULTING LLC
Ref. Number: L11000016663

We have received your document for GILIBERTI CONSULTING LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 812A00001067

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Giliberti Consulting, 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:

Joseph S. Giliberti, Jr.
Name of Person

Giliberti Consulting LLC
Firm/Company

9781 Arbor Oaks Lane Apt. 204
Address

Boca Raton, FL 33428
City/State and Zip Code

joegiliberti@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph S. Giliberti, Jr. at 561, 843-8648
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

FILED

2012 JAN 24 PM 3:13

Gilberti Consulting LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 2/8/2011 and assigned
Florida document number L11000016663

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here: N/A

The new name must be distinguishable and end with 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)

Gilberti Consulting LLC
9781 Arbor Oaks Lane Apt. 204
Boca Raton, FL 33428

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Gilberti Consulting LLC
9781 Arbor Oaks Lane Apt. 204
Boca Raton, FL 33428

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:

N/A / SAME

New Registered Office Address:

9781 Arbor Oaks Lane Apt. 204

Enter Florida street address

Boca Raton

City

, Florida

33428

Zip Code

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 Changing Registered Agent, Signature of New Registered Agent

211000016663

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>	<u>Address</u>	<u>Type of Action</u>
			☐ 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.)*

Dated _____

X 

Signature of a member or authorized representative of a member

X Joseph S. Giliberti, Jr.

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 JAN 24 PM 3:13

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