L110000 34677

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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2016 JUL 25 PM 4: 16
SECRETARY OF STATE

K. SALY EXAMINER JUL 28

COVER LETTER

TO:	Registration Se Division of Cor		•	
SHRI	US Consult	ting Advisors LLC		
3000	EC1	Name of Lim	ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	endence concerning this matter	to the following:	
		Jason W. Searl, Esq.		
			Name of Person	
		Gray Robinson, P.A.		
			Firm/Company	
		301 E. Pine Street, Suite 14	400	
			Address	
		Orlando, Florida 32801		
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
		Jason.Searl@Gray-Robinso		
			to be used for future annual report notif	ication)
For fur	ther information co	oncerning this matter, please ca	all:	
Jason	W. Searl, Esq.		at () Area Code Daytime	t. 6201
	Name of	f Person	Area Code Daytime	Telephone Number
Enclos	ed is a check for th	ne following amount:		
■ \$2	5.00 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
2016 JUL 25 PM 4: 16
ALLAHACRY OF STATE

US Consulting Advisors LLC

(Name of the Limited Liability Company as it now appears on our record

•	(A Florida Limited Liability Company)	LURION
The Articles of Organization for this Limited Li		and assigned
Florida document number L11000034677	·	
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE I	<u></u>	
B. If amending the registered agent and/or the new registered of	or registered office address on our records, <u>er</u> fice add <u>ress here</u> :	nter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Florid	a
	, , 110110	Zip Code

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Rafael Guerrero	9431 Fountainebleau Blvd #204	
		Miami, FL 33172	■ Remove
			☐ Change
MGR	Luis F. Montalvo	6941 SW 196th Ave., Suite 30	
		Fort Lauderdale, FL 33332	☐ Remove
			Add
			□ Remove
			☐ Change
<u></u>			Add School 2
			25 Addi Change C
			□ Change
			D Add
			□ Remove
			☐ Change

	nding any other information, enter change(s) here: (Anach additional sheets, if necessary)
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ectiv	re date, if other than the date of filing:
<u>te:</u> 11	I the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as th
umer	nt's effective date on the Department of State's records.
	and a section and all and afficient and all a section and a section of the sectio
<i>reco</i> he 9	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
led _	Tuy 22 2016 1
	Signature of a member or authorized representative of a member
	Signature of a member organization tepresentative of a member

Page 3 of 3

Filing Fee: \$25.00