111000094408

(Re	questor's Name)	
. (Ad	dress)	
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(Cit	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
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COVER LETTER

Division of Co	ta Consulting, LLC	•	
SUBJECT:		ted Liability Company	
	Name of Limi	led Liability Company	
The enclosed Articles o	f Amendment and fee(s) are subi	mitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
	Gail R. Bedtelyon		
		Name of Person	
	Mobile Data Consulting, L	LC	
	. <u>. </u>	Firm/Company	
	3028 Olenda Drive		
		Address	
	The Villages, FL 32163		
		City/State and Zip Code	
	gbcdtclyon@copnotes.com		
	E-mail address: (to be used for future annual report notific	cation)
For further information	concerning this matter, please ca	all:	
Gail R. Bedtelyon		989 573-0197 at ()	
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

Mobile Data Consulting, LLC.						
(Name of the Lin	ited Liability Comps (A Florida Limited	nny as it now appears on our records.) Liability Company)				
The Articles of Organization for this Limited Florida document number L11000094408	Liability Company	were filed on August 17, 2011	and assigned			
his amendment is submitted to amend the fo	llowing:					
A. If amending name, enter the new name	of the limited liab	ility company here:				
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."			
Enter new principal offices address, if appl	icable:	3028 Olenda Drive				
Principal office address MUST BE A STREET ADDRESS)		The Villages, FL 32163				
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		3028 Olenda Drive The Villages, FL 32163				
3. If amending the registered agent an egistered agent and/or the new registered			er the name of the ne			
Name of New Registered Agent:	Gail R. Bedtely	von	SSS so I			
New Registered Office Address:	3028 Olenda D		T'S Z			
	The Villages	Enter Florida street address, Florida	32163 5			
		City	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 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>	Name	Address	Type of Action
Mr.	Matthew B. Bedtelyon	3028 Olenda Drive	□ Add
		The Villages, FL 32163	■ Remove
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		May 1, 2017				
ective date, if other than a effective date is listed, the date	must be specific ar	ng:nd cannot be prior to	o date of filing or m	opti ore than 90 days afte	r filing.) Pursuant to	605.02
te: If the date inserted in this cument's effective date on the	block does not	meet the applica	ble statutory filing	g requirements, thi	is date will not be	listed
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record specifies a dela	ved effective	date, but not	an effective t	ime at 12·01	am on the ea	arlier
he 90th day after the i	ecord is filed	l.		, u , ut 11,01,		
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Filing Fee: \$25.00