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Florida Department of State **Division of Corporations** PO Box 6327 Tallahassee, FL 32314

July 14, 2014

Gentlemen:

We are submitting an Amendment to the following LLC.

LA Consulting & Counseling, LLC L11000143526

Should you have questions, we can be reached at the following:

Marnie Barrett

561-702-3570

Mbarrettboca@gmail.com

Cleck# 1518

COVER LETTER

TO: Registration Section **Division of Corporations**

-A Consulting & Counseling, 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:

Paul Alleva

Name of Person

LA Consulting & Counseling, LLC

Firm/Company

900 Linton Blvd #205

Address

Delray Beach, FL 33444

City/State and Zip Code

palleva@lifescapesolutions.com

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

For further information concerning this matter, please call:

Paul Alleva

at (561) 628-6651

Area Code Daytime Telephone Number

Name of Person

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)

Check #1518

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

LA Consulting & Counseling LLC			
(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our records.) .imited Liability Company)		
The Articles of Organization for this Limited Liability Co Florida document number L11000143526	ompany were filed on12/21/2011	and as	signed
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company here:		
The new name must be distinguishable and end with the words "Limi	ited Liability Company," the designation "LLC" or th	ne abbreviation "	L.IC."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	<u>ESS)</u>		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
	10.00		
B. If amending the registered agent and/or registe		er the name	of the
registered agent and/or the new registered office addre	<u>ess here</u> :		
		<u></u>	
Name of New Registered Agent:			
New Registered Office Address:		11.	
	Enter Florida street address	PH.	117
	, Florida	ယ္က	
	City	Sir 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member **Title** Name Address Type of Action Jordan Boudle 900 Linton Blvd #205 **MGRM** ■ Add Delray Beach, FL 33444 □ Remove Lisa Alleva 900 Linton Blvd #205 MGRM □ Add Delray Beach, FL 33444 900 Linton Blvd #205 Lisa Alleva AMBR ■ Add Delray Beach, FL 33444 ☐ Remove Phil Diaz 900 Linton Blvd #205 **MGRM** □ Add Delray Beach, FL 33444 Remove Phil Diaz 900 Linton Blvd #205 AMBR Delray Beach, FL 334 Remove Spencer Kinard 900 Linton Blvd #205 **AMBR** ■ Add Delray Beach, FL 33444

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Note: Two of the existing MGRM's are only being changed from MGRM
to AMBR: See Phil Diaz and Lisa Alleva. Since there was
not an option to "modify" I noted them as remove (old) and add the.
new designation.
E. Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State) Dated Signature of a member or authorized representative of a member
Paul D Alleva

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

COVER LETTER

TO: Registration Section
Division of Corporations

R&J CLEANING MANAGEMENT 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:

JAVIER MADRONAL

Name of Person

R&J CLEANING MANAGEMENT LLC

Firm/Company

110 SINCLAIR STREET, SW

Address

PORT CHARLOTTE, FLORIDA 33952

City/State and Zip Code

JAVI2212@HOTMAIL.COM

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

For further information concerning this matter, please call:

JAVIER MADRONAL

786 395 2472

Name of Person

Area Code

□ \$55.00 Filing Fee &

Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status

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 632X Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301