

L12000002433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2013 MAY 29 AM 11:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

MAY 30 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

Four Elements Strategy LLC

SUBJECT: _____
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:

Christine Grogan

Name of Person

4 elements strategy LLC

Firm/Company

235 sunrise ave #2217

Address

Palm Beach Fl 33480

City/State and Zip Code

cgrogan@4elementsstrategy.com

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

For further information concerning this matter, please call:

Christine Grogan

917 617-0141

at (_____) _____

Name of Person

Area Code & Daytime Telephone Number

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TALLAHASSEE, FL 32301

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input checked="" type="checkbox"/> \$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**

Four Elements Strategy 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 Company were filed on 1/5/12 and assigned
Florida document number 45-4195954 EIN

L12000002433

This amendment is submitted to amend the following:

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

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)

235 sunrise ave #2217

Palm Beach Fl 33480

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

235 sunrise ave #2217

palm beach fl 33480

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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:

New Registered Office Address:

Enter Florida street address

Florida

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 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

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

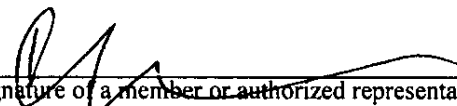
MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|------------------|-----------------------------|--|
| ✓mgrm | Sandra Berriman | 82 Stoney Dr | <input type="checkbox"/> Add |
| | | Palm Beach Gardens Fl 33410 | <input checked="" type="checkbox"/> Remove |
| ✓mgrm | Patti Buhler | 82 stoney dr | <input type="checkbox"/> Add |
| | | Palm beach gardens fl 33410 | <input checked="" type="checkbox"/> Remove |
| mgrm | abhi ambegaonkar | 82 stoney dr | <input type="checkbox"/> Add |
| | | palm beach gardens fl 33410 | <input checked="" type="checkbox"/> Remove |
| ✓mgrm | larry montgomery | 82 stoney dr | <input type="checkbox"/> Add |
| | | palm beach gardens fl 33410 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated 05/26/2103



Signature of a member or authorized representative of a member
Christine L. Grogan President and Major share holder

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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