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2016 MAR -7 AM 10: 41

K. SALY EXAMINER MAR - 9

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Mercury Management Consulting, LUC Name of Dimited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person
Mercury Mangement Consulting, LLC
1110 POIO Park EUST BIVA
Davenport, Fl 33897 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
LOCCON CLOFFEY at (803 274-5138) Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee U\$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S25.00 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

ART	ICLES OF ORGANIZATION OF	2016 MAR -7 AM 10: 42
MEYCUN MONON	dentity Company as it now appears on our in (A Florida Limited Liability Company)	COORDS AM 10: 42
The Articles of Organization for this Limited Life Florida document number		and assigned
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	f 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 applic	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u></u>	
B. If amending the registered agent and/ registered agent and/or the new registered of		cords, enter the name of the nev
Name of New Registered Agent:	Rebecca Carper	Her
New Registered Office Address:	116 POID PYK E Enter Florida street	BIVO
	Enter Florida street	Elavida 22807

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>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Rebecca Carpenter	116 POLO PRINCE BIND, DAVE	2004 Add 3897
			Remove
			Change
MORM	Garrett Kenny	We DAN DAN E RIVI	Add
		The Polo Park E Blud Davenport, At 23897	Remove
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fective date, if other that in effective date is listed, the dote: If the date inserted in secument's effective date on	this block does not n	neet the applicabl	ate of filing or more the statutory filing rec	(optior han 90 days after fi puirements, this c	ling.) Pursuant to 605.	.020 :d a
record specifies a de The 90th day after th	layed effective of e record is filed.	late, but not a	in effective time	e, at 12:01 a.	m. on the earlie	er o
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	Signature of a	m River or authoriz	ed representative of	memb.		

Page 3 of 3

Filing Fee: \$25.00