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SUBJEC	.l;		Name of Limi	ted Liability Company			
The encl	osed Arti	cles of Ai	mendment and fee(s) are subi	nitted for filing.			
Please re	eturn all c	orrespond	ence concerning this matter t	to the following:			
			Gerard Cicoria				
				Name of Person		_ 	
			Consulting LLC Name of Limited Liability Company mendment and fee(s) are submitted for filing. lence concerning this matter to the following: Gerard Cicoria Name of Person Illumination Consulting 1.LC Firm/Company 5270 Maria Drive Address Saint James City, FL 33956 City/State and Zip Code gerardstree@gmail.com E-mail address: (to be used for future annual report notification) cerning this matter, please call: at (
				Firm/Company			
			5270 Maria Drive				
	Address						
			Saint James City, FL 33950	5			
			City/State and Zip Code				
			- - -	Name of Person Prim/Company Ve Address y, FL 33956 City/State and Zip Code ail.com ail address: (to be used for future annual report notification) er, please call: at (
			E-mail address: (t	o be used for future annua	l report notification)		
For furth	ner inform	nation con	cerning this matter, please ca	ilt:			
Gerard (Cicoria				18-2753		
	•	Name of P	erson		Daytime Telephon	e Number	
Enclosed	l is a chec	ck for the	following amount:				
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	Divisio	n of Cor	porations	Divisio	on of Corporation	S	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Illumination Consulting LLC			
(Name of the Limi	ted Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)	<u> </u>
The Articles of Organization for this Limited L Florida document number L12000092642	Liability Company w	ere filed on 07/17/2012	and assigned 2
This amendment is submitted to amend the foll	lowing:		
A. If amending name, enter the new name o	of the limited liabilit	ty company here:	
G & V Adventures 25 LLC			
The new name must be distinguishable and contain the	words "Limited Liability	Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	Same	
(Principal office address MUST BE A STREE	<u>ET ADDRESS)</u>		
Enter new mailing address, if applicable:		Same	
(Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and/or agent and/or the new registered office addre		dress on our records, <u>enter the</u>	name of the new register
Name of New Registered Agent:	Same		
New Registered Office Address:			
		Enter Florida street address	
		, Florid	
		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 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

Title	<u>Name</u>	Address	Type of Action
Manager	Noah Cicoria	·	
			■Remove
			□ Change
			🗆 Add
			□Remove
			
			□Add
			
			□Add
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