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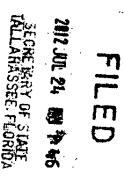
(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO: Registration Son Division of Con					
SUBJECT: Callabro Consulting, LLC					
		d Liability Company			
	Amendment and fee(s) are subm	-			
Please return all correspond	ondence concerning this matter to	o the following.			
		Marilyn Olmsted			
		Name of Person			
Navon & Lavin, P.A.					,
Firm/Company				SEC.	
2699 Stirling Road, Suite B-100				JUL 24 JHE TARY AHASSE	7
		Address		SSE VAY	_
Fort Lauderdale, FL 33312				7. S	
		City/State and Zip Code			<u></u>
	MOIM E-mail address: (to	sted@navonlavin.com be used for future annual report not	tification)	% . 6	
For further information	concerning this matter, please ca	11:			
Ma	rilyn Olmsted	at (_954_)	967-2788		
Name	of Person		me Telephone Numbe	г	
Enclosed is a check for t	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	ed) Certified	ite of Status &	ed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COUR Registration Sect Division of Corp Clifton Building 2661 Executive C Tallahassee, FL	orations Center Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(Name of the Limited) (A	allabro Consulting, LLC Liability Company as it now appear Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Lia Florida document number L12000093		July 18, 2012	and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liability company he	<u>re</u> :	
	Calabro Consulting, LLC		
The new name must be distinguishable and end with "L.L.C." Enter new principal offices address, if applica (Principal office address MUST BE A STREET) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I) B. If amending the registered agent and/oregistered agent and/or the new registered office.	BOX) r registered office address on	AHASSEE. FLORIDA	FILED 287 JUL 29. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18
Name of New Registered Agent:	Stephen R. Calabro		
New Registered Office Address:	2810 N.E. 30th Street, Uni	it A	
New Registered Office Address.		nter Florida street addr	ess
	Fort Lauderdale	, Florida	33306
	City		Zip Code
New Registered Agent's Signature, if changing R	egistered 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 **Type of Action Title Name** Address MGRM Stephen R. Callabro 2810 N.E. 30th Street, Unit A ☐ Add Fort Lauderdale, FL 33306 ✓ Remove Stephen R. Calabro MGRM 2810 N.E. 30th Street, Unit A ✓ Add Fort Lauderdale, FL 33306 Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

July 19

Signature of a member or authorized representative of a member

Stephen R. Calabro

Typed or printed name of signee

Dated __

Page 2 of 2

Filing Fee: \$25.00