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	(Requestor's Name)	_
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<u>.,, .,, .</u>	(City/State/Zip/Phone #)	_
PICK-	UP WAIT MAIL	
	(Business Entity Name) (Document Number)	_
ertified Copies	Certificates of Status	
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J. SAULSBERRY EXAMINER

AUG 15 2013

## **COVER LETTER**

TO: . . Registration Section **Division of Corporations** 

Eagle Consulting and Brokese Flam, UC
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:

Jenni Fee Wind
Name of Person gle Consulting Fiam, ue. EAgle Consulting fiem a) amail. Com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jennifer Ninj at ( 954 ) 393-0028

Area Code & Daytime Telephone Number

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)

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

EAGLE CONSULTING And (Name of the Limited Liability Company a	Brokrage fiem,	uc	
( <u>Name of the Limited Liability Company a</u> (A Florida Limited Liabi	s it now appears on our reco lity Company)	rds.)	•
The Articles of Organization for this Limited Liability Company we Florida document numberL12000 10 48 91	re filed on	<b>12</b> and	assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	y company here:		
22262 INVEHMENTS			
The new name must be distinguishable and end with the words "Limited "L.L.C."			he abbreviation
Enter new principal offices address, if applicable:	6221 NW 17 Hlami , FL	9 TERR	2
(Principal office address MUST BE A STREET ADDRESS)	Hlami, FL	3301	<u></u>
<u>-</u>			
		3.1. N=	
Enter new mailing address, if applicable:	40	77,07	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		( 7)	<u> </u>
<u> </u>		32	<del></del>
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	address on our records,	enter the nam	e of the new
Name of New Registered Agent:			
New Registered Office Address:			<del></del>
-	Enter Florida st	reet address	
		orida	
	lity:	Zip C	ode

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
M6R	Donna Galloway	2269 NE 31 Street	Add
	,	Lighthouse Point, TL	Remove
MGR	Paulette Philips	1081 SW ISB AVENUE	Add
		Pembroke fines, FC 33027	Remove
			Add
	•		Remove
			7 7 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			Remove
	<u></u>		Add
			Remove
			Add
			Remove

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
. •	·
-	
	August 12 2013
ated	<u>August 12</u> , <u>2013</u> .
	Sonre lucece
	- Smit full
	Signature of a member or authorized representative of a member
	Jennifer Wind
	Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

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