## 1/2000/097//

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(Address)
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(Business Entity Name)
(Document Number)
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## **COVER LETTER**

	Registration Se Division of Cor				
CHULFC	Dolphin IT	Consulting LLC			
SUBJEC	T:	Name of Lim	ited Liability Company		
The encle	osed Articles of	Amendment and fee(s) are sub	mitted for tiling.		
Please ret	urn all correspo	ndence concerning this matter	to the following:		
		Michael J. Petty			
			Name of Person		
		Dolphin IT Consulting LL	С		
	Fim/Company				
		268 NW 12th Street			
		·	Address		
		Boca Raton, FL 33432			
		mpetty@DolphinFT.com	City/State and Zip Code		
			to be used for future annual report ne	otification)	
For furthe	er information c	oncerning this matter, please ca	all:		
Michael .	J. Petty		954 826-0787		
	Name o	f Person	at () Area Code Dayti	me Telephone Number	
Enclosed	is a check for th	ne following amount:			
\$25.0	0 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

Dolphin IT Consulting LLC			
( <u>Name of the Limited Liabili</u> (A Florida	ity Compa a Limited	nny as it now appears on our rec Liability Company)	(ords.)
The Articles of Organization for this Limited Liability C	Company	were filed on 08/27/2012	and assigned
lorida document number L12000109711	<u>_·</u>		
This amendment is submitted to amend the following:			
a. If amending name, enter the new name of the lim	ited liab	nility company here:	
he new name must be distinguishable and contain the words "Lim	nited Liabi	lity Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		268 NW 12th Street	
(Principal office address MUST BE A STREET ADD		Boca Raton, FL 33432	5.
			7
Enter new mailing address, if applicable:		268 NW 12th Street	
Mailing address MAY BE A POST OFFICE BOX)		Boca Raton, FL 33432	
			2 3 3 3 S
3. If amending the registered agent and/or regis			ords, enter the name of the
egistered agent and/or the new registered office add	ress ner	<u>v</u> .	
Name of New Registered Agent: Micha	iel J. Petty	y	
New Registered Office Address: 268 N	W 12th S		
		Enter Florida street ad	dress
Boca I	Raton		, Florida <u>33432</u>
		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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager

Title	<u>Name</u>	Address	Type of Action
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			□ Remove
			Change
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te: If the date inserted in this	the date of filing:	rable statutory filing re	( <b>optiona</b> than 90 days after tilinequirements, this da	ig.) Pursua	nt to 605 t be liste	.0207 (3 ed as th
record specifies a delay he 90th day after the r	yed effective date, but no record is filed.	ot an effective tim	ie, at 12:01 a.m	on the	e earlie	er of:
ed July 7th	2017					
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