

L12000145745

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

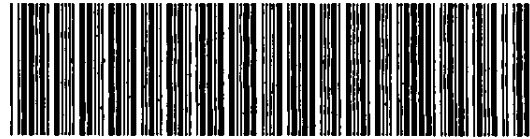
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

MAY -9 2013

A. LUNT

Office Use Only



500247639355

05/07/13--01010--032 \*\*25.00

2013 MAY -7 PM 12:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: OH2 Consulting, LLC**

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:

**Eduardo J. Curiel**

Name of Person

**OH2 Consulting, LLC**

Firm/Company

**P.O. Box 823872**

Address

**Pembroke Pines, FL 33082**

City/State and Zip Code

**oh2@oh2consulting.com**

E-mail address: (to be used for future annual report notification)

2013 MAY -7 PM 1:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

**Eduardo J. Curiel**

Name of Person

**305 495-3713**

at ( )

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**

**OH2 Consulting, LLC**

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on Nov 19, 2012 and assigned  
Florida document number L12000145745.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

780 Fisherman St. Suite 334

Opa-Locka, FL 33054

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

**Name of New Registered Agent:** \_\_\_\_\_

**New Registered Office Address:** \_\_\_\_\_

*Enter Florida street address*

\_\_\_\_\_, Florida \_\_\_\_\_  
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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Pedro Gonzalez	3601 NW 107th Av. #101	<input type="checkbox"/> Add
		Doral, FL 33178	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 MAY - 7 PM

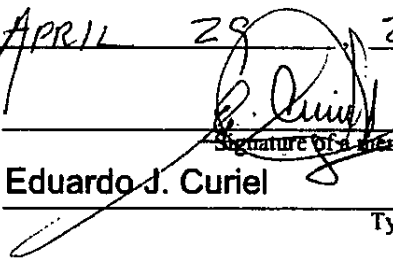
FILED

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

## Managers/Member Resignation

Dated

APRIL 29 2013

  
Signature of a member or authorized representative of a member

Eduardo J. Curiel

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 MAY - 7 PM 4:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

## MANAGERS RESIGNATION

### OH2 CONSULTING, LLC

The President, Eduardo Curiel, then recognized the manager named below who tendered his resignation, effective upon the adjournment of this meeting. Upon motioned duly made, and seconded and carried said resignation was accepted and the secretary of the meeting was ordered to spread same upon the minutes of the meeting.

I, Pedro Elias Gonzalez, Director of OH2 Consulting LLC hereby tender my resignation to take effect upon the adjournment of the meeting. I hereby relinquish all my rights, title and interest in OH2 Consulting LLC. All the members hereby accept said resignation.

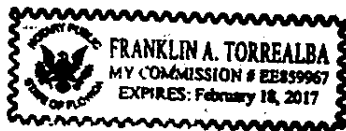
Sworn to and subscribed before me this 4 day of April, 2013

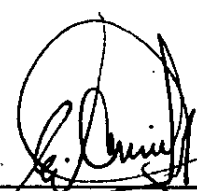


Pedro Elias Gonzalez

Date

NOTARY PUBLIC – State of Florida at Large  
My Commission Expires 2/18/2017



  
Eduardo Curiel

4/6/13  
Date

  
Francisco Rodriguez

4/20  
Date

  
Ariadna Risher

4/20/13  
Date