## L13000010007

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SECRETARY OF STATE

C. LEWIS
FEB 1 1 2013
EXAMINER

## COVER LETTER

TO: Registration Section
Division of Corporations

Incorrect members

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:

Stephen Chasse

Name of Person

629 Kenwood St NE

Firm/Company

Palm Bay

Address

FL, 32907

City/State and Zip Code
schassefl@gmail.com

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

For further information concerning this matter, please call:

Stephen Chasse

, 321 **890-8477** 

Name of Person

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

# TO SECRETARY OF STATE ARTICLES OF ORGANIZATION OF CORPORATION OF

2013 FEB -8 AM 8: 46

Business First Consulting LLC	
( <u>Name of the Limited Liability Company</u> ; (A Florida Limited Liab	as it now appears on our records.)
(A Florida Billion Liao	only Company)
The Articles of Organization for this Limited Liability Company we	ere filed on 1/22/2013 and assigned
Florida document number L13000010007	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabilit	y company here:
The new name must be distinguishable and end with the words "Limited "L.L.C."	Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
-	
Enter new mailing address, if applicable:	<u></u>
(Mailing address MAY BE A POST OFFICE BOX)	
~-	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	e address on our records, enter the name of the new
registered agent and/of the new registered office address nere-	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
(	Tity 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 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: SECRETARY OF STATE OLVISION OF CORPORATION

MGR = Manager MGRM = Managing Member

2013 FEB -8 AM 8: 46

		\$410 1 mm -	
<u>Title</u>	Name	Address	Type of Action
MGRM	Sean Chasse	629 Kenwood St NE	Add
		Palm Bay	Remove
		FL, 32907	
MGRM	Michael Chasse	161 Franklin St	Add
		Westfield	Remove
		MA, 01085	
			Add
			Remove
			Add
			Remove
	•		
			Add
			Remove
			Add
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D. If ar jending any other information, enter change(s) here: (Attach additional shape) The initial percentage of ownership should be			AſĘ
90% - Stephen Chasse	2013 FEB -8		
10% - Michael Chasse			
Dated Fenruary 5th 2013		<del></del>	
Signature of a member of authorized representative of a result of a member of authorized representative of a result of a member of authorized representative of a result of a member of authorized representative of a result of a member of authorized representative of a result of a member of authorized representative of a result of a member of authorized representative of a result of a member of authorized representative of a result of a member of authorized representative of a result of a member of authorized representative o	nember		
Stephen Chasse			_
Typed or printed name of signee  Page 3 of 3			

Filing Fee: \$25.00