*L13000069492

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400270191384

03/11/15--01013--025 **25.00

2015 HAR II PH 2: 52

K.SALY EXAMINER MAR 31 2015

COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJE	ст: <u>У</u> ји	BRELLA CON Name of Lim	SULTING GROO ited Liability Company	PUC
The encl	losed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please re	eturn all correspon	dence concerning this matter	to the following:	
		_ Owka)	13 HAWAS Name of Person	
		DIFIDO 1	NORLO INVESTIV	MENTS
		612 H	Address W	
		Roswe	City/State and Zip Code	
	Division of Corporations JECT: UMBRELLA CONSULTING OR ROUP LLC Name of Limited Liability Company Enclosed Articles of Amendment and fee(s) are submitted for filing. The return all correspondence concerning this matter to the following: OURA BRANKS Name of Person DIFILO WOLLD INVESTMENTS Firm/Company CIL HAMPICWAY LA Address ROSWELL GA 30075			
For furth	ner information co	ncerning this matter, please ca	all:	
_D	VEN SA Name of	RNES Person	at (646) 235 Area Code Daytime	7604 Telephone Number
Enclosed	d is a check for the	following amount:		
\$25.	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

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

SECRETARY OF STATE

The Articles of Organization for this Limited Liability Company were filed on ________________________________ and assigned Florida document number 6940 1 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) 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

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

MGR = Manager AMBR ≈ Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
ybky	DILLO WORLD INVESTMENTS	9401 Roberte Dr Atlanta GA 30350	🗆 Add
		Atlanta GA 30350	IV Remove
			
			Remove T
			Remove PHR 11 PH 2: 52 Remove PHR 11 PH 2: 52 Remove PHR 11 PH 2: 52
			□ Remove ~
			🗖 Add
			□ Remove
			🗆 Add
			_□ Remove

	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
	date, if other than the date of filing:
Dated	
	Signature of a member or authorized representative of a member
	OWED BARNE! Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

