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COVER LETTER

TO: 1

Registration Section
Division of Corporations

SUBJECT

DIRIV Consultants 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:

Selena Samale

Name of Person

Perlman, Bajandas, Yevoli & Albright P.L.

Firm/Company

200 S. Andrews Ave. Suite 600

Address

Fort Lauderdale FL 33301

City/State and Zip Code

selena@pbyalaw.com

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

For further information concerning this matter, please call:

Selena Samale

, 954 **566-7117**

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DIRIV Consultants LLC				
(Name of the Limited Liability Co (A Florida Limit	mpany as it now appears on our record ted Liability Company)	<u>ls.</u>)		
The Articles of Organization for this Limited Liability Comp	pany were filed on July 18, 2013	a	ınd assig	gned
Florida document number L13000102080				
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 "L.L.C."	Limited Liability Company," the designa	tion "LLC"	or the ab	breviation
Enter new principal offices address, if applicable:		 	~	
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	7 1	===	
			3	****
		74.5 14.1	3-2	1
Enter new mailing address, if applicable:		± , , ,		
(Mailing address MAY BE A POST OFFICE BOX)		رن ا	ik	•
		원론		
			- 6	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		nter the n	ame of	the nev
Name of New Registered Agent:				
New Registered Office Address:	F . Ft . 1			
	Enter Florida stre	ei adaress		
	, Flori		p Code	
	City	Zij	Coue	

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 = M	MGRM = Managing Member					
<u>Title</u>	<u>Name</u>	Address 1	Type of Action			
MGR	Jeff Rivit	200 S. Andrews Ave Suite 600	Add			
		Fort Lauderdale, FL 33301	Remove			
MGR	Jeff Rivet	200 S. Andrews Ave Suite 600	Add			
		Fort Lauderdale, FL 33301	Remove			
	·		Add Remove			
			Add Remove			
		- Coally Six	Add			
			Remove			
··			Add			
			Remove			

). If amo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)				
-					
-					
-					
ited	July 26, 2013.				
	SSanale				
	Signature of a member or authorized representative of a member				
	Selena Samale				
	Typed or printed name of signee				

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Filing Fee: \$25.00

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