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ALLAHASSEE, FLORIDA

T. Burch JUL 3 0

COVER LETTER

TO: Registration Sec Division of Corp						
SUBJECT: Execu	utive Concierge Services LLC					
50 5 0£01.	Name of Limited Liability Company					
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.					
Please return all correspon	ndence concerning this matter to the following:					
	Kai Stadler					
	Name of Person					
	Tropical Management Group					
	Firm/Company					
	218 Commercial Blvd, Suite 106					
	Address					
	Lauderdale by the Sea, FL 33308					
	City/State and Zip Code kaistadler@gmail.com					
	E-mail address: (to be used for future annual report notification)					
For further information co	oncerning this matter, please call:					
Kai Stadler	954\696-3304					
Name of	f Person Area Code Daytime Telephone Number					
Enclosed is a check for th	e following amount:					
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fe					

MAILING ADDRESS:

Certificate of Status

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certificate of Status &

(additional copy is enclosed)

Certified Copy

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certified Copy

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Executive Concierge S				
(Name of the Limi	ted Liability Compa (A Florida Limited I	nv as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited L Florida document number L1300010340	iability Company	were filed on $\frac{7/2}{}$	2/2013 and assigned	
This amendment is submitted to amend the foll	lowing:			
A. If amending name, enter the new name of	of the limited liab	ility company her	<u>e</u> :	
The new name must be distinguishable and end with the	words "Limited Liab	ility Company," the d	esignation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applie	cable:	218 Commercial Blvd, Suite 106		
(Principal office address MUST BE A STREE		Lauderdale	by the Sea, FL \$3308	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and registered agent and/or the new registered of	/or registered of		our records, enter the name of the new	
Name of New Registered Agent:	Weiss Lav	w Group, PA		
New Registered Office Address:	12512 W.	Atlantic Blvd		
Trew Regimensa Office Planters.	Enter Florida street address			
	Coral Spri	ngs	, Florida 33071	
		City	Zip Code	
New Registered Agent's Signature, if changing				
I hereby accept the appointment as register provisions of all statutes relative to the prop	ed agent and agr per and complete	ee to act in this co performance of t	apacity. I further agree to comply with th ny duties, and I am familiar with and	

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

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 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 **AMBR** Tropical Management Group LLC 218 Commercial Blvd, Suite 106 **■** Add Lauderdale by the Sea, FL 33308 □ Remove □ Add ☐ Remove □ Add Remove AIS Remove □ Add ☐ Remove □ Add _□ Remove

nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ve date, if other than the date of filing:
July 22, 2014
Signature of a member or authorized representative of a member Kai Stadler

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Filing Fee: \$25.00

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TALLAHASSEE, FLORIDO