L13000105148

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Na	me)
(Doc	ument Number	1
Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	





400280212654

12/30/15--01011--007 **25.00

2015 DEC 30 PN 12: 01

M. Cidigan JAN + 4 2010

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Perfect World 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:
Dan Harter Name of Person
Perfect World Consulting LLC Firm/Company
521 Pinelles Bayway 5 # 407
Tierra Verde FL 33715
Tierra Verde FL 33715 City/State and Zip Code dan. harter eperfectworldlic.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dan Harter at (727) 871-0654 Name of Person Area Code Daytime Telephone Number
Area Code Daytine receptone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{Certificate of Status} \text{Certified Copy} \text{(additional copy is enclosed)}

TO:

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

FILED

2015 DEC 30 PN 12: 01

C	PF	SHORFTARY OF STATE TALLAMASSET, FLORIDA
Perfect World Consulti (Name of the Limited Liability Companies (A Florida Limited	NG LLC INV as it now appears on our i Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>Li3000105148</u> .	were filed on $07/25$	7/2013 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity 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)	571 Pinellas B Apt 407 Tierra Verde,	ayway S FL 33715
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	521 Pinellas Apt 407 Tierra Verde	Bayway S FL 33715
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		cords, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	address
	Citv	_, Florida Ziv Code
New Degistered Agent's Signature if shanging Degistered Agents	•	Zip 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 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

MGR = M $AMBR = A$	lanager uthorized Member			
<u>Title</u>	<u>Name</u>		Address	Type of Action
				□ Add
				□ Remove
				☐ Change
	,			□ Add
		÷*	· · · . · . · · · · ·	□ Remove
				Change
				□ Add
				☐ Remove
				☐ Change
			<u></u>	
				□ Remove
				☐ Change
				□ Add
				□ Remove
				☐ Change
				□ Add
				Remove
				☐ Change

2015
330
30
₽
<u>.</u>
10

Page 3 of 3

Filing Fee: \$25.00