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(Re	equestor's Name)	···
(Ac	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
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COVER LETTER

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	gistration Section vision of Corporat				
SUBJECT:	Back House Con	sulting, LLC (name change)		
SUBJECT.		Name of Limite	ed Liability Company		
The enclosed	d Articles of Amer	ndment and fee(s) are submi	itted for filing.		
Please return	all correspondent	ce concerning this matter to	the following:		
	D	avid Brooks			
			Name of Person		
	В	ack House Consulting, LLC	C		
	_		Firm/Company		
	19	978 Rockledge Blvd, Suite	107		
	_		Address		
	R	ockledge Fl 32955			
	-		City/State and Zip Code		
	da	vidbrookssr@gmail.com			
		E-mail address: (to	be used for future annual re	port notification)	
For further i	nformation concer	ning this matter, please call	l:		
David Broo	ks		321 704-1	0772	
	Name of Perso	n	Area Code	Daytime Telepho	one Number
Enclosed is	a check for the following	lowing amount:			
□ \$25.00 l	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

Back House Consulting, LLC		
(<u>Name of the Limited I</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	 _
The Articles of Organization for this Limited Liabi	ility Company were filed on 4/33/14	and assigned
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of the	e limited liability company here:	
Interval Consulting, LLC		
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	2X)	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>ent</u> e address here:	er the name of the new
		S. F
Name of New Registered Agent:		PT. TO THE PERSON
New Registered Office Address:	Enter Florida street address	7 7
		**
-	, Florida	Zip Code
	Cujv	Lip 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
President	Louis Brooks Sr.	800 Jode Road, Norristown PA 194	■ Add
			□ Remove
			Change
Vice Pres	David Brooks Sr.		Add
			□ Remove
			Change
Tres	Stephen Brooks	6048 Johnson Rd NW, Hahira GA	Add
			PRemove
			Change
			P Remove
			□ Change
			Add
			Remove
			Change
			Add
			□ Remove
			Change

Summary- We are changing the name and adding officers to the LLC	
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	γ. 904
tive date, if other than the date of filing: ffective date is listed, the date must be specific and cannot be prior to date of filing.	(optional)
If the date inserted in this block does not meet the applicable statutor	
ment's effective date on the Department of State's records.	
ecord specifies a delayed effective date, but not an effect	tive time, at 12:01 a.m. on the earli
e 90th day after the record is filed.	·
March 30 th , 2016.	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00