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COVER LETTER

Division of Corporations
SUBJECT: Neumann Consulting Group 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:
Chris Neumann Name of Person
Neumann Consulting Group LLC
1535 Erin Lane
Clearwater FL 33755 City/State and Zip Code
Cneuman @ tamabay . rc. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Chris Neumann at (727) 743-1749 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$60.00 Filing Fee,

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

Neuman C (Name of the Limited Liability (A Florida L	Company as it now appears on our records.	·UC
The Articles of Organization for this Limited Liability Con Florida document number		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and end with the words "Limitenter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDREST ADDREST)		the abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registe registered agent and/or the new registered office addre		ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	1 60 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 ×
	, Florida	1 <u>77</u>
	City	Zip Code
New Registered Agent's Signature, if changing Registered	Agent:	· c

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, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Ai	AMBR = Authorized Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action		
MGR	Chris Neumann	1535 ErinLane	X Add		
		1535 ErinLane Clearwater, FC 33755	□ Remove		
			<u> </u>		
			□ Add		
			□ Remove		
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If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.
	date, if other than the date of filing: (optional) we date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after is document is filed by the Florida Department of State)
Dated	8-4-14
	Opris A
	Signature of a member or authorized representative of a member
	Chris Neumana
	Typed or printed name of signee

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Filing Fee: \$25.00