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From:

Account Name : RC TAX SERVICE LLC
Account Number : I20140000083
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INFINITY C & S CONSULTING LLC

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: INFINITY C&S 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:

SANDRA OCAMPO

Name of Person

INFINITY C&S CONSULTING LLC

Firm/Company

3128 LORRY LN

Address

ORLANDO, FL 32822

City/State and Zip Code

sandra.lilliana.ocampo@hotmail.com

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

For further information concerning this matter, please call:

SANDRA OCAMPO

at (**321**)

947-2935

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
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☐ \$55.00 Filing Fee &
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☐ \$60.00 Filing Fee,
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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

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 = Authorized Member

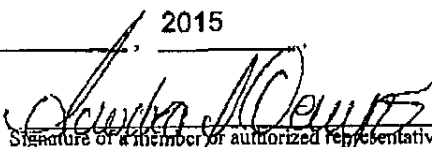
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	CARLOS A. DIAZ	3128 LORRY LN	<input type="checkbox"/> Add
		ORLANDO, FL 32822	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated MARCH 23, 2015



Signature of a member or authorized representative of a member

SANDRA OCAMPO

Typed or printed name of signer

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