

L15000057568

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

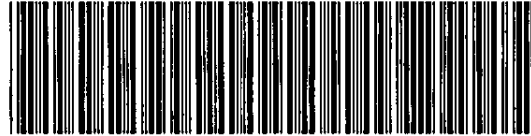
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16 MAY 12 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 13 2016

Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

CONSULTING & EMPLOYMENT FIRM, 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:

ALBAN MELATJ

Name of Person

AM CONSULTING & EMPLOYMENT FIRM, LLC

Firm/Company

900 BISCAYNE BLVD. APT 709

Address

MIAMI FL 33132

City/State and Zip Code

ALBAN MELATJ @ YAHOO.COM

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

For further information concerning this matter, please call:

ERIKA SILVERBERG

Name of Person

at (561) 271-5487

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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**

AM CONSULTING & EMPLOYMENT FIRM, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/01/15 and assigned Florida document number L 15000057568.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

EASY VALET, LLC
The new name must be distinguishable and contain the words "Limited Liability 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)

900 BISCAYNE BLVD 709
MIAMI FL, 33132

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

N/A

New Registered Office Address:

Enter Florida street address

_____, Florida _____

City

Zip Code

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>	<u>Address</u>	<u>Type of Action</u>
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AMBR	ERIKASTOR		☐ Add
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AMBR	ERIK SILVERBERG	900 BISCAYNE BLVD 709	☒ Add
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		MIAMI, FL 33132	☐ Remove
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FILED
16 MAY 12 PM 4:00
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
16 MAY 12 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 05/09/16

Signature of a member or authorized representative of a member

ALBAN MUGATJ
Typed or printed name of signee