## 1500078829

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J. HARRIE

## **COVER LETTER**

TO: Re Di	egistration Sectivision of Corp	tion orations	•	
	Vega Group			
SUBJECT	:	Name of Limite	d Liability Company	
The enclos	ed Articles of A	mendment and fee(s) are subm	itted for filing.	
Please retu	m all correspon	dence concerning this matter to	the following:	
		Alexander Irvine		
			Name of Person	
			Firm/Company	
		6574 N. State Road 7 #112	<u> </u>	
			Address	
		Coconut Creek, FL 33073		
			City/State and Zip Code	
		rich@bocaaccounting.com		
		E-mail address: (t	o be used for future annual report notifica-	ation)
For further	er information c	oncerning this matter, please ca	dl:	
Alexando	er Irvine		954 218-9880 at ()	
	Name o	of Person	Area Code Daytime	Telephone Number
Enclosed	is a check for t	he following amount:		
<b>■ \$25.</b> 0	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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the				
	ELimited Liability Company as it now appe (A Florida Limited Liability Company	<u>ars on our records.</u> )		
The Articles of Organization for this Limi	ited Liability Company were filed on	)5/05/2015	_ and as:	signed
lorida document number L15000078829				
This amendment is submitted to amend th	ne following:			
A. If amending name, enter the new na	ame of the limited liability company	here:		
The Alliance Group Consulting LLC				
he new name must be distinguishable and contain	in the words "Limited Liability Company," the	e designation "LLC" or the abbre	viation "l.	.L.C."
Enter new principal offices address, if a	applicable:	 Xe :	2	
Principal office address MUST BE A S	••	<del></del> ;;	1 HI	margary.
Timelyan office and cook noon burner		:: 1°	<u> </u>	e ine
			<u> </u>	7
			<b>_</b>	(74
Inter new mailing address, if applicable	le:			10.00
<u>Mailing address MAY BE A POST OF I</u>	FICE BOX)	<u> </u>		• •
		·.'	T.	

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 Title Name <u>Address</u> **Type of Action** 6574 N.State Road 7 #112, Coconut Creek, FL 33073 & Add Steven Steinmetz MGR ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change □ Add Remove AUG □ Change \*\* ☐ Remove ☐ Change

i amending any other information, e	nter change(s) here: (Attach additional sheets, if i	necessary.j
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Note: If the date inserted in this block do locument's effective date on the Department	cific and cannot be prior to date of filing or more than 90 days a es not meet the applicable statutory filing requirements,	this date will not be listed as
The 90th day after the record is		
ated August 15	2017	2617 I Á Í
Signati	ure of a member or anthorized representative of a member	A DG
Alexander Irvine	/	
<del></del>	Typed or printed name of signoe	
		3 N
	Page 3 of 3	# ⊞`∵ U1

Filing Fee: \$25.00