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2015 NOV -2 AN II: 5: SECRETARY OF STATE

N. Cumpan NOV - 3 2015

COVER LETTER

TO:	Registration Se Division of Cor			
SUBJEC		ulting Services, LLC		
SUBJEC	LI:	Name of Lim	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		G. Keith Lewis		
			Name of Person	
		KDL Consulting Services,	LLC	
		- ·· · · · · · · · · · · · · · · · · ·	Firm/Company	
		4502 Highway 20 East, Su	ite A	
			Address	
		Niceville, FL 32578		
			City/State and Zip Code	
		vsheppard@cricpa.com		
		E-mail address: (to be used for future annual report notif	ication)
For furth	er information c	oncerning this matter, please ca	all:	
D. Timo	thy Herndon		850 897-4333	
	Name o	f Person		Telephone Number
Enclosed	l is a check for th	ne following amount:		
\$25.0	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
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO **ARTICLES OF ORGANIZATION OF**

FILED 2015 NOV -2 AM 11: 56

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

KDL Consulting Services, LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)		
		a. V. July 17, 2015

This amendment is submitted to amend the following:	•
· ·	, !!!
A. If amending name, <u>enter the new name of the limited liab</u>	mty company nere:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4502 Highway 20 East, Suite A
(Principal office address MUST BE A STREET ADDRESS)	Niceville, FL 32578
Enter new mailing address, if applicable:	4502 Highway 20 East, Suite A
• • • •	Niceville, FL 32578
B. If amending the registered agent and/or registered of	ffice address on our records, enter the name of the ne
B. If amending the registered agent and/or registered of	ffice address on our records, enter the name of the ne
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	ffice address on our records, enter the name of the ne
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:	ffice address on our records, enter the name of the nee: Enter Florida street address
	ffice address on our records, enter the name of the ne
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:	Enter Florida street address

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
MGR	G. Keith Lewis	4502 Highway 20 East, Suite A	
		Niceville, FL 32578	Remove
			☐ Change
MGR	Debra Lewis	4502 Highway 20 East, Suite A	
		Niceville, FL 32578	Remove
		 	☐ Change
			□ Add
			Remove
			Change
			Add
			Remove
			☐ Change
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			□ Remove
			Change
			□ Add
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			☐ Change

	
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	2015 NOV -2 AM III: 56 SECRETARY OF STATE TALLAMASSEE, FLORID
	FILE
	ATE ATE
E. Effective date, if other than the date of filing:	(ontional)
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more the Note: If the date inserted in this block does not meet the applicable statutory filing reconduction document's effective date on the Department of State's records.	nan 90 days after filing.) Pursuant to 605.0207 (3)(b) uirements, this date will not be listed as the
If the record specifies a delayed effective date, but not an effective time (b) The 90th day after the record is filed.	, at 12:01 a.m. on the earlier of:
Dated 10.29.2015 Signature of a member or authorized representative of a	memher
G. Keith Lewis	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00