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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR 31 2016

J SHIVERS

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Givanna 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:

Laura Jones

\_\_\_\_\_  
Name of Person

Givanna Consulting LLC

\_\_\_\_\_  
Firm/Company

4456 Cortez Rd. W

\_\_\_\_\_  
Address

Bradenton, FL 34210

\_\_\_\_\_  
City/State and Zip Code

giveconsult101@gmail.com

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

For further information concerning this matter, please call:

Laura Jones

954 557-3278  
at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
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**

Givanna Consulting 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 01/06/2016 and assigned  
Florida document number L16000003680.

This amendment is submitted to amend the following:

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

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:**

4456 Cortez Rd W.

**(Principal office address MUST BE A STREET ADDRESS)**

Brandenton. FL 34210

**Enter new mailing address, if applicable:**

2501 Discovery Dr

**(Mailing address MAY BE A POST OFFICE BOX)**

Orlando. FL 32826

**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:

Laura Jones

New Registered Office Address:

4456 Cortez Rd. W.

*Enter Florida street address*

Brandenton

*City*

Florida

*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>
MGR	David Weiss	463 Livingston St.	<input checked="" type="checkbox"/> Add
		Norwood, NJ 07648	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Luara Jones	4456 Cortez Rd. W	<input checked="" type="checkbox"/> Add
		Bradenton, FL 34210	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Gawens St. Victor	8255 W Sunrise Blvd	<input type="checkbox"/> Add
		Plantation, FL 33322	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Steven Smith	1737 Spring arbor Rd	<input checked="" type="checkbox"/> Add
		Jackson, MI 49203	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

16 MAR 30 AM 9:1  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

(b) The 90th day after the record is filed.

Dated March 22 2016

David Weiss

Signature of a member or authorized representative of a member

David Weiss

Typed or printed name of signee