## 11600010853

(Re	equestor's Name)	
(Ad	dress)	,
(Ad	dress)	
(Cit	ry/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		!

Office Use Only



200292139702

12/01/16--01017--004 \*\*30.00

16 DEC - I PH I2: 21
DIVISION OF BORPGRATIONS

O SIMMONS DEC 0 5 2016

## **COVER LETTER**

TO:		ration Sect on of Corpo				
CUDIE.	OI	RNSTEIN &	& PARTNERS CONSULTIN	NG GROUP, LLC		
SUBJE	CI;	Name of Limited Liability Company				
The enc	losed Aı	ticles of A	mendment and fee(s) are sub-	mitted for filing.		
Please re	eturn all	correspond	lence concerning this matter	to the following:		
			KAREN ORNSTEIN			
				Name of Person		
				Firm/Company		
			3941 SW 144TH TERRAC	CE		
				Address		
			MIRAMAR, FLORIDA 33	3027		
				City/State and Zip Code		
KARENORNSTEIN@GMAIL.COM						
			E-mail address: (	to be used for future annual report noti	fication)	
For furtl	her infor	mation con	cerning this matter, please ca	all:		
KAREN	N ORNS	TEIN		305 904-6797		
		Name of P	Person		e Telephone Number	
Enclose	d is a ch	cck for the	following amount:			
\$25.	.00 Filin	g 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:

TO:

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

ORNSTEIN & PARTNERS CONSULTING GROUP, 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  $^{1/15/2016}$ and assigned Florida document number L16000010853 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: POINT BLANK, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 3941 SW 144TH TERRACE Enter new principal offices address, if applicable: MIRAMAR, FLORIDA 33027 (Principal office address MUST BE A STREET ADDRESS) **3941 SW 144TH TERRACE** Enter new mailing address, if applicable: MIRAMAR, FLORIDA 33027 (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: 5 KAREN ORNSTEIN Name of New Registered Agent: **3941 SW 144TH TERRACE** New Registered Office Address: Enter Florida street address **MIRAMAR** 

## 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.

City

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
AMBR	MARK ORNSTEIN	16440 SW 39 STREET	□ Add
		MIRAMAR, FLORIDA 33027	■ Remove
			☐ Change
	**************************************		Add
			□ Remove
			☐ Change
			Change  OLIVISION OF CHANGE  PM Change  Add
			Change 2
			Remove
			Change
			Add
	•		Remove
			☐ Change
			Add
		·	□ Remove
			□ Change

<del></del>					
<u></u>					
				9 5	
				18 DEC -1 PH 12: 2	-
				9. 1	
				PH IZ: 2	
	····			P: 2	
<del>-,, .</del> ,,				- 7	
				<u> </u>	
			,		
Effective d	ate, if other than the date	of filing:		(optional)	
(If an effective Note: If the	e date is listed, the date must be see date inserted in this block deffective date on the Depart	pecific and cannot be prior to coos not meet the applicable	late of filing or more than 90 day	s after filing.) Pursuant to 605.0	207 (3)(t l as the
the record ) The 90t	specifies a delayed efforther in the specifies and specifies and specifies are specified as the specifies are specified as the specifies are specified as the specifies asp	ective date, but not a is filed.	n effective time, at 12	:01 a.m. on the earlier	of:
Dated	11/28	, 20 /6			
	,	att 17		*	
-	Signa	ature of a member of sutheriz	ed representative of a member		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00