LIL 0000 37282

(Re	questor's Name)	-
(Ad	dress)	
(Δd	dress)	
(Au	uicss)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
	siness Entity Nar	na)
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(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Registration S Division of Co			
	lm Consulting LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Keaton Alexander		
	 -	Name of Person	
	Silver Palm Consulting L	LC	
		Firm/Company	
	2300 N Scenic Hwy		
		Address	•
	Lake Wales, FL 33898		
		City/State and Zip Code	
	Name of Person Silver Palm Consulting LLC Firm/Company 2300 N Scenic Hwy Address Lake Wales, FL 33898		
For further information	concerning this matter, please co	all;	
Keaton Alexander			
Name	of Person		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)

TO:

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

Silver Palm Consulting LLC		
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany <u>as it now appears on our records.</u>) d Liability Company)	
The Articles of Organization for this Limited Liability Compar	ny were filed on February 23, 2016	and assigned
florida document number 16000037282		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liz	ability company here:	
he new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the a	abbreviation "L.L.C."
inter new principal offices address, if applicable:		<u></u>
Principal office address MUST BE A STREET ADDRESS)		
		18
		8 - 1 OF (
nter new mailing address, if applicable:		3 000 000 000 000 000 000 000 000 000 0
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u>မှ သို့ခြ</u>
		ှ
 If amending the registered agent and/or registered egistered agent and/or the new registered office address he 		the name of the r
Name of New Registered Agent:		
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>	Type of Action
MGR	John D. Alexander	2300 N Scenic Hwy	
		Lake Wales, Fl 33898	Remove
			☐ Change
MGR	GR Keaton Alexander	2300 N Scenic Hwy	Add
		Lake Wales, FI 33898	Remove
		·	☐ Change
			Remove
			Change
			
			Remove
			Change
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		- -	Remove
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ective date, if other the	in the date of Gli	01/01/2018		(nations	1\
reffective date is listed, the determinant	ate must be specific a	ind cannot be prior t	o date of filing or me	c than 90 days after film	ig.) Pursuant to 605,02
cument's effective date on			one statutory ming	requirements, this day	e will flot be fisted
record specifies a de The 90th day after th			an effective ti	me, at 12:01 a.m	. on the earlier
May 1	4	2018			
) [_	1.1	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00