Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H160001875043)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone

: (323)962-8600

Fax Number

: (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:				

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MARTIN S. FLACKS CONSULTING, LLC

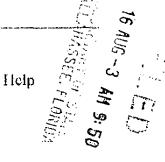
Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

AUG 0 4 2016

Y SULKER



COVER LETTER

		istration Sec sion of Corp				
CITO IEC		MARTIN:	S. FLACKS CONSULTING	G, LLC		
SUBJEC	Uli.		Name of Lim	ited Liability Company		
			Amendment and fee(s) are sub-	Ť		
Trounc (c		un contespor	Cheyenne Moseley			
				Name of Person		
			Legalzoom.com, Inc.			
				Firm/Company		·····
			101 N. Brand Blvd., 11t	h Floor		
				Address		
			Glendale, CA 91203			
				City/State and Zip Code		
			martin@msfconsultingllo	com to be used for future annual re		
.		.			cpon nouneación)	
For turn	ber in	tormation co	oncerning this matter, please of			
Cheyen	ine N	Aoseley -		aı ()	-0888 ext. 972	4
		Name of	Person	Area Code	Daytime Teleph	one Number
Enclosed	d is a	check for th	e following amount:			
□ \$2 5.	.00 Fi	ling Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is encident)		3 \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is saclosed)
			NG ADDRESS:		COURIER AD	DRESS:

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

	City	Ztp Co	de	
	. Florida	1		
New Registered Office Address:	Enter Florida street address	 . ,		
THE PARTY OF THE P		2-	<u> </u>	
Name of New Registered Agent:		当所	ഖ	ši , "*
	•	E C	άö	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ter the pan	<u> </u>	ile new
D. If any also substant and added nonlinear of	Est address on our mosconds am	رن برازا درن	دن مورد	ha man
		- 33 ji -	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)	Lakewood Ranch, FL 34211	3		
Enter new mailing address, if applicable:	PO Box 110179	<u> </u>	=	
		• •,		
(Principal office address MUST BE A STREET ADDRESS)	Lakewood Ranch, FL 34202			
Enter new principal offices address, if applicable:	16923 Loudon Piace			
The new name must be distinguishable and end with the words "Limited Liabi		the abbreviation	"L.L.C	
A. If amending name, enter the new name of the limited liabil	lity company here:			
This amendment is submitted to amend the following:				
Florida document number L16000058735				
The Articles of Organization for this Limited Liability Company	were filed on 03/23/2016	and a	198igne	d
(Name of the Limited Liability Compar (A Florida Limited L	iability Company)			
(Name of the Limited Liability Compar	ny as it now appears on our records.)		•	

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

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
Title	<u>Name</u>	Address	Type of Action
			Remove
			Ď Remove
			16 AUG - 3 AMY 99: 50
			□ Remove
			☐ Remove

16923 Loudon Place, I	akewood Ranch, FL 34202
ne effective date must be specific, o	he date of filing: (optional annot be prior to date of receipt or filed date and cannot be more than 90 days after a Florida Denartment of State)
he effective date must be specifie, on the date this document is filed by the	amnot be prior to date of receipt or filed date and cannot be more than 90 days after
The effective date must be specific, or the date this document is filed by the	annot be prior to date of receipt or filed date and cannot be more than 90 days after Florida Department of State) 2016
The effective date must be specific, or	annot be prior to date of receipt or filed date and cannot be more than 90 days after i Florida Department of State)

Page 3 of 3

Filing Fee: \$25.00

