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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: CORPORATE CREATIONS INTERNATIONAL INC. Account Name

Account Number : 110432003053 : (561)694-8107 Fax Number : (561)694-1639

\*\*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 ABROAD CONSULTING LLC

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D. SCOTT NOV 1 7 2016

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Abroad Consulting LLC				
(Name of the Limited L (A)	lability Company as it now appears on our records.) Florids Limited Lizbility Company)			
The Articles of Organization for this Limited Liabil Florida document number Li 6000114420	lity Company were filed on 06/15/2016	and ass	signed	
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liability company here:			
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the abbr	eviation "L	.L.C."	
Enter new principal offices address, if applicable	e;			
(Principal office address MUST BE A STREET A	(DDRESS)			
				<del></del>
Enter new mailing address, if applicable:	<u> </u>		<u></u>	_
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>	<u> </u>		
			. GD	
R. If amending the registered agent and/or a	registered office address on our records, enter th	全部 多額me	AON.	e-new
registered agent and/or the new registered office		28 O	တာ	
Name of New Registered Agent:		, ESE ESE ESE ESE ESE ESE ESE ESE ESE ES	æ	Ö
N-2			Ç	
New Registered Office Address:	Enter Florida street address		Ѿ	
_	, 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>	Name	Address	Type of Action		
MGR	Philip Jenkins Jr.	500 N. MICHIGAN AVE #1540	D Add		
		CHICAGO, IL 60611	■ Remove		
			☐ Change		
MGR	Kenneth Crossley	500 N. MICHIGAN AVE #1540	■ Add		
		CHICAGO, IL 60611	□ Remove		
			□ Change		
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			THE Change D		
			STAND STAND		
			Remove		
			☐ Change		

Effective date, if other than the date of filing:  If one 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 Note; If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The 90th day after the record is filled.  Signature of a member or authorized representative of a member.  Lauren Vadney, Attorney-in-Fact	If amending any othe	r mutmation, euter	сданде(в) пеге:	(Anach adaine	mai sneeis, y neci	essary.)	
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Filing Fee: \$25.00