## L16 000 175 156

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nar	me)
(Dx	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		!

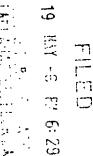
Office Use Only



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U5/U5/19--U1018--U03 \*\*25.00

MAY 1 6 2019 S. YOUNG



## **COVER LETTER**

то:	Registration Sec Division of Corp		•	•
		E CONSULTING, LLC		
SUBJE	CI:	Name of Limi	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspon	ndence concerning this matter	to the following:	
		SANDRA M LINDO		
		<del></del>	Name of Person	
		IMMEDIATE CONSULT	ING, LLC	
Firm/Company				
339 WESMOND DRIVE				
Address ALEXANDRIA, VA 22305				
			City/State and Zip Code	
		DALUNDA21@GMAIL.C		
		E-mail address: ()	to be used for future annual report notifi	cation)
For furt	her information co	oncerning this matter, please ca	all:	
SAND	RA M LINDO		843 2908170 at () Area Code Daytime	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	e 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

IMMEDIATE CONSULTING, LLC		
( <u>Name of the Limited Liability C</u> (A Florida Li	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Com Florida document number L16000125156	npany were filed on 06.30.2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited</u>	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" o	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u>SSS)</u>	5-1 5E T
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register registered agent and/or the new registered office address  Name of New Registered Agent:		enter the name of the ne
New Registered Office Address:	Enter Florida street address	
	. Flori	ida
	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>	Address	Type of Action
MGR	SANDRA M LINDO	339 WESMOND DRIVE ALEXANDRIA, VA 22305	Add
			Remove
			Change
MGR	RICHARD HELLER	900 SCOTIA DR APT 201 HYPOLUXO, FL 33462	
			■ Remove
			□ Change
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			Remove
			□ Change
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Effective date, if other than the fant of the fact of the date is listed, the date in this locument's effective date on the	s block does not meet the app	olicable statutory filing req	(optional) an 90 days after filing.) Pursuan uirements, this date will not	nt to 605.0207 be listed as
e record specifies a delay The 90th day after the r		not an effective time	, at 12:01 a.m. on the	earlier o
May 1st	2019			
		<b>_</b> _		

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Typed or printed name of signee

Filing Fee: \$25.00