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TALLARIASSEE, FLORIDA

OCT 0 4 2016

S. YOUNG

COVER LETTER

ion Section of Corporations	
Consulting LLC	
Name of Limited Liability Company	
les of Amendment and fee(s) are submitted for filing.	
rrespondence concerning this matter to the following:	
Joan Yuen	
Name of Person	
JGa Consulting LLC	
Firm/Company	
1135 Venetian Harbor Dr NE	
Address	→ E8
St. Petersburg, FL 33702	6 00 AA
City/State and Zip Code jga.consulting.llc@gmail.com	TE OCT -3 PH 4: 45
E-mail address: (to be used for future annual report notification)	2
ation concerning this matter, please call:	+: 0g
941 538-2442	3 PH 4: 45
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c for the following amount:	
Certificate of Status Certified Copy Certificate of State (additional copy is enclosed) Certified Copy	tus &
	Name of Limited Liability Company les of Amendment and fee(s) are submitted for filing. rrespondence concerning this matter to the following: Joan Yuen Name of Person JGa Consulting LLC Firm/Company 1135 Venetian Harbor Dr NE Address St. Petersburg, FL 33702 City/State and Zip Code jga.consulting llc@gmail.com E-mail address: (to be used for future annual report notification) tion concerning this matter, please call: 1941 Area Code Daytime Telephone Number 1 for the following amount: 1 for the following amount: 1 cec \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee & Certificate of Status Certificate Of Status

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

JGa Consulting LLC		
(<u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number	Company were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		9 2
(Principal office address MUST BE A STREET ADDR	RESS)	
		ပ် မြို့
		2
Enter new mailing address, if applicable:		ي ب
		5
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		ter the name of the nev
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 = N AMBR = N	Manager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			☐ Change
			Remove
			Change Congression
			سو رستان الم
			Add Remove 5
		/	Change
			□ Remove
			Change
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			☐ Change
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	lanaging Partner for JGa Consulting LLC	
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ocument's effective date on the Dep	irtment of State's records.	
record specifies a delayed e	effective date, but not an effective time, at 12:0	01 a.m. on the earlier of:
The 90th day after the recor	d is filed.	
September 29	2016	
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Page 3 of 3

Filing Fee: \$25.00