## 1170000 40065

(D-	questor's Name)	
(Ке	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	

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R. WHITE

APR 22 2019

2019 APR -4 PM 1: 19



## **COVER LETTER**

TO:

Registration Section

Division of 6	Corporations		
CHDICOT.	True Path Diag		
(additional copy is enclosed) Certified Copy (additional copy is enclosed			
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	DAN	IEL GUTIERREZ	
	-	Name of Person	·· <del></del>
		SD&M Consultants	
	Firm/Company		
	1400 NE 35th st St	nite 212	
		Address	
	Fort Lauderdale	, FL 33334	
		City/State and Zip Code	<del></del>
	<del>_</del>		
		·	ication)
For further informatic	on concerning this matter, please e	all;	
DANIEL GU	THERREZ	at ( 954 ) 348-3969	
Nau	ne of Person		Telephone Number
Enclosed is a check fo	or the following amount:		
_		Certified Copy	Certificate of Status &
Reg	ALING ADDRESS: gistration Section ision of Corporations	STREET/COURI Registration Section Division of Corpora	n
P.O	b. Box 6327 lahassee, FL 32314	Clifton Building 2661 Executive Cer	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Trus Pau	L Dimostic		APR -4 PM 1:19
(Name of the Limited)	iability Confirmy as ithnow appears of lorida Limited Liability Company)	n our records.) [FA]	I ME
The Articles of Organization for this Limited Liabil	ity Company were filed on09/	17/2018	and assigned
Florida document numberL17000040065	·		
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	: limited liability company here	:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the design	mation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable	<u></u>		
(Principal office address MUST BE A STREET A	Name of the Limited Liability Company is thow appears on our records.)  (A Florida Limited Liability Company)  Deganization for this Limited Liability Company were filed on		
Enter new mailing address, if applicable:	01.020.340	'ILLAGE PARK	WAY
Comming unifers Butt DE ATVAT OF FICE DO.	PORT ST L	UCIE, FL 34987	· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered agent and/or the new registered office  Name of New Registered Agent:	address here:		
New Registered Office Address	1400 NE 35th St Suite 1	212	
The regiment of the regiment.			
<u>-</u>		, 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

Title	<u>Name</u>	Address	Type of Action
AMBR	SD& M Consultants, LLC		🗆 Add
		1400 NE 55th St suite 203 Fort Lauderdale FL 33334	x Remove
			Change
AMBR	SD& M Consultants, LLC	1400 NE 35th St Sute 212 Fort Lauderdale ,FL 33334	Add
			□ Remove
		<del></del>	Change
			<b>D</b> Add
		-	Remove
			_□ Change
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ote: If t	e, if other than the date of filing:	207 Las
e recor The 90	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier day after the record is filed.	10
ated	arch 28th . 2019	
	Signature of a member or authorized representative of a member	
	Daniel Gutierrez	
	Typed or printed name of signce	

Page 3 of 3

Filing Fee: \$25.00