L1700008643

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Đocument Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500300270515

Đố/20/17--01030--006 ••€25.00



S. WARREN 'JUN 2 1 2017

TO: Registration S Division of Co			
SUBJECT:	Isreal Cor	Sulting group ited Liability Company	LLC
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Stepl	nen A. Isreal	
	Isreal Con	rsulfing group L	LC
	109 SE	4th Arc	
		Address	
	Boynton	Beach FL 33 City/State and Zip Code	3435
	S teve	City/State and Zip Code 15 real@gmail.com to be used for future annual report notifi	ication)
For further information	concerning this matter, please ca	ail;	
<u>Stephen</u>	R Isreal	at (<u>\$61</u>) <u>306-</u> Area Code Daytime	-9072 Telephone Number
Enclosed is a check for	the 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 tadditional 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

Toreal Consulting (Name of the Limited Liability Compi	Froup LLC	
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	<mark>any as it now appears on c</mark> Liability Company)	ur records.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L17 000068693</u>	were filed on <u>0.3</u>	<u> </u>
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designa	tion "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<u></u>
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida sti	eci address
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	•	r.p. Cinte
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	vee to act in this capa performance of my d provided for in Chapt	uties, and I am familiar with and er 605, F.S. Orifithis document is

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 = Au	thorized Member		
Title	Name	Address	Type of Action
<u>AMBR</u>	Stephen R. Isreal	109 SE 4th Arc Boynton Brack FL 33435	≦_□ Add
			□ Remove
			Change
			□ Add
			☐ Remove
			D Change
			□ Add
			_ □ Remove
			_□ Change
			_□ Add
			_ Remove
			_□ Change
			_□ Add
			△□ Romove
			JUMPER ILEO JUMPER ILEO JUMPER ILEO AND CHICAGO A REPORT A REPO
		ORIO RIO	⊒≓ ⊒□ R ≘ ove
			_□ Change

						
						
			·			
						
					<u> </u>	
		 .				
	_,		····			
<u></u>		-			 -	
			<u> </u>			
						
ective date, if	other than the	e date of fili	ng:		(0)	otional)
reffective date is	listed, the date mu inserted in this b	ist be specific as	nd cannot be pric	or to date of filing o	more than 90 days a	ptional) after filing.) Pursuant to 605.02 this date will not be listed
	ive date on the I					
	ifies a delaye / after the red			ot an effective	e time, at 12:0	1 a.m. on the earlier
redJ	ine 1	f	201	7		
	,	<u>1</u>	-A	-1		17.
		Signature of	a member of aut	horized representat	ve of a member	FIL JUN 20
		<i>(</i> -1		. Isree	1	
		~ L .	1	1500	e l	

Page 3 of 3

Filing Fee: \$25.00