117000095733

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



800299407258

05/18/17--01017--013 **30.00



MAY 1 9 2017 Y SULKER

COVER LETTER

TO:	Registration Se Division of Cor		* ,	
SUBJ	ЕСТ:	eppinen (Onsultants ited Liability Company	LLC
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	e return all correspo	ndence concerning this matter	to the following:	
		Sheres	Name of Person	
		eppi	nen Consulta	nts LLC
		7309	Hid Raway	-rail
		Tr	City/State and Zip Code	4655
		E-mail address: (i	to be used for future annual report notific	mail.com
For fu	rther information co	oncerning this matter, please ca	all:	
	Shere e	Person	at (777) 69 Area Code Daytime	2 - S 8 8 9 7 Telephone Number
Enclos	sed is a check for th	e following amount:		
□ \$2	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status -	□ \$55.00 Filing Fee & — Centified Cupy (additional copy is enclosed)	S60.00 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

— Leppinen (Name of the Limited	d Liability Company as it now appears on our records.)			
	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)			
The Articles of Organization for this Limited Lia	bility Company were filed on Mau 1, 2	0 7an	ıd assig	gned
1 1011au document manifest 1 (COCO)	, , , , , , , , , , , , , , , , , , , 			
This amendment is submitted to amend the follow	ending name, enter the new name of the limited liability company here: me must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." w principal offices address, if applicable:			
Florida document number 1700045733. This amendment is submitted to amend the following: 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 designation "LLC" or the abbreviation "LLC." 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)				
The new name must be distinguishable and contain the wor	rds "Limited Liability Company," the designation "LLC" or the	abbreviation	on "L.L.	.C."
Enter new principal offices address, if applical	ble:			
(Principal office address MUST BE A STREET	ADDRESS)			
Enter new mailing address, if applicable:	•	*		
	on			
transing secures will be a logi of lice b	<u></u>			
		7-2-		·
B. If amonding the posistaned agent and/a				e ascultura
registered agent and/or the new registered officer	r registered office address on our records, <u>ente</u> ce address here:	r tne na	-	the new
		ří.	© D	
		77,		
Name of New Registered Agent:			197 <u>.</u>	r (hate)
New Registered Office Address:			Gia)	-
	Enter Florida street address			
	Flaulda			
· — · · · · · · · · · · · · · · · · · ·	, Florida _	Lip c	-	

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	Sherce Leppinen	7389 Hidea	way Toll Add
			□ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
			□ Remove
			□ Change
		·	□Ādd
			□ Remove
			Change
			: □ 4dd
		,	□ Remove
			☐ Change
			□ Remove
			☐ Change

			_ _
			_
,	. •		
	•••		_
			_
			_
			_
			_
			
			_
		17	_
	12 m 25 m	E CO	- ,
	<u> </u>		- ;;
	The state of the s	(T)	
		THE THE	- 15 2 1
		100	_
			-
fective date, if other than the date of filing:	(optional)		-
recurre dute, it other than the dute of immg,	90 days after filing.) Pursu	ant to 60	5.020
an effective date is listed, the date must be specific and cannot be prior to date of filing or more than	rements, this date will h	ot be iis	ted as
an effective date is listed, the date must be specific and cannot be prior to date of filing or more than ote: If the date inserted in this block does not meet the applicable statutory filing requiperument's effective date on the Department of State's records.			
an effective date is listed, the date must be specific and cannot be prior to date of filing or more than ote: If the date inserted in this block does not meet the applicable statutory filing requiperument's effective date on the Department of State's records.			
an effective date is listed, the date must be specific and cannot be prior to date of filing or more than ote: If the date inserted in this block does not meet the applicable statutory filing requiperument's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, and a specifies a delayed effective date, but not an effective time, and an effective time.	at 12:01 a.m. on th	ne earli	ier o
an effective date is listed, the date must be specific and cannot be prior to date of filing or more than ote: If the date inserted in this block does not meet the applicable statutory filing requiperument's effective date on the Department of State's records. The south day after the record is filed.	at 12:01 a.m. on th	ne earli	ier of
an effective date is listed, the date must be specific and cannot be prior to date of filing or more than ote: If the date inserted in this block does not meet the applicable statutory filing requiperument's effective date on the Department of State's records. The south day after the record is filed.	at 12:01 a.m. on th	ne earli	ier of
an effective date is listed, the date must be specific and cannot be prior to date of filing or more than ote: If the date inserted in this block does not meet the applicable statutory filing requiperument's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, and a specifies a delayed effective date, but not an effective time, and an effective time.		ne earli	ier of

Page 3 of 3

Filing Fee: \$25.00