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## **COVER LETTER**

ro:	Registration Se Division of Cor			
SUBJE	ct: DR	L Consulting	Services LLC	
		Name-e <b>c</b> limi	ited Liability Company	
Fhe one	locad Articles of	Amendment and fec(s) are sub	mitted for filing	
		ndence concerning this matter	_	
	·	~ ·		
		Dack	nel C. Payrol Name of croon	<del></del>
		DRL Cons	ulting Sonices Lu	
		1641 V	V Flagler St	<del></del>
		Miami	FL 33135 City/State and Zip Code	
				· · · · · · · · · · · · · · · · · · ·
		E-mail address: (i	to be used for future annual report not	Or) ification)
For furt	her information c	oncerning this matter, please ca	all:	
	Duhel C.F	ayrol	at ( <u>786</u> ) 239 -	
	Name o	f P <b>el</b> son	Area Code Daytin	ne Telephone Number
Enclose	ed is a check for the	ne following amount:		
<b>E</b> \$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)
		ING ADDRESS:	STREET/COUR Registration Secti	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

TOI Consulting Convince 110

DRL Consulting Servi	
( <u>Name of the Limited Liability Compan</u> (A Florida Limited Li	v as it now appears on our records.)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L17000102551</u> .	vere filed on 05 09 2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liability	
Enter new principal offices address, if applicable:	1641 W Hagler ST
(Principal office address MUST BE A STREET ADDRESS)	Miami FL 33135
Enter new mailing address, if applicable:	1641 W Flagler ST
(Mailing address MAY BE A POST OFFICE BOX)	Miami FL 33135
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code
Now Davietorad Agant's Cianatura if abanging Dagietorud Luante	

## 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, <u>enter the title, name, and address of each person</u> <u>being a or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
			Change
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z. u amei	ding any other information, enter change(s) here: (Attach daattonal sheets, if necessary.)
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(If an effe <u>Note:</u> I	tive date, if other than the date of filing:  (optional)  (tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nt's effective date on the Department of State's records.
f the reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated _	October 5th 2019
	Signature of a member of a member
	Dachel C. Pay of Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00