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TALLAHASSEE, FI OBIG.

FILED

COVER LETTER

Division of Corpor	rations	
On and SUBJECT:	Off 4 You, LLC changing to Professional Business Concierg	e, LLC
	Name of Limited Liability Company	
The enclosed Articles of An	mendment and fee(s) are submitted for filing.	
Please return all corresponde	dence concerning this matter to the following:	
	Jon G Fried	
	Name of Person	
	Professional Business Concierge	
	Firm/Company	
	7130 SW 9th Street	
	Address	
	Plantation, FL 33317	
	City/State and Zip Code	
	Jon@readysource.com	
•	E-mail address; (to be used for future annual report notificat	ion)
For further information cond	cerning this matter, please call:	
Jon Fried	954 797 4147 at ()	_
Name of Po	erson at () Area Code Daytime Te	lephone 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 (additional copy is enclosed)

Registration Section

TO:

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

On and Off 4 You, LLC		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) .iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000145696</u>	were filed on <u>07/07/2017</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
Professional Business Concierge, LLC		
The new name must be distinguishable and contain the words "Limited Liability	ity Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:	It is the same	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	It is the same	
(Mailing address MAY BE A POST OFFICE BOX)	7130 SW 9 Street, Plantation,FL 33	317
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:		the name of the new
	, Florida	TO REPORTS
New Registered Agent's Signature, if changing Registered Agent:	City	Ser E

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 = MAMBR = A	lanager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			□ Remove
			Change
			Remove
			Change
			Add
			□ Remove
			Remove
			☐ Change
			Remove
			Change
<u></u>			
			Remove
			Change

Just changing the name from On and Off 4 You, LLC to	Professional Business Concierge, LLC
	SEC ALL,
	APR :
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	27, 32
	10 (A) (C) (A) (C) (A) (A) (A) (A) (A) (A) (A) (A) (A) (A
ective date, if other than the date of filing:	(optional)
effective date is listed, the date must be specific and cannot be prior to date of fie: If the date inserted in this block does not meet the applicable statut	iling or more than 90 days after filing.) Pursuant to 60
ument's effective date on the Department of State's records.	ion in the second secon
record specifies a delayed effective date, but not an effe	ective time at 12:01 a.m. on the earl
ne 90th day after the record is filed.	selive time, at 12.01 quin on the dair
ed April 18, 2018.	
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NL XTELL	esentative of a member

Page 3 of 3

Filing Fee: \$25.00