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| (Requestor                       | 's Name)               |
|----------------------------------|------------------------|
| (Address)                        |                        |
| (Address)                        |                        |
| (City/State                      | /Zip/Phone #)          |
| PICK-UP                          | WAIT MAIL              |
| (Business                        | Entity Name)           |
| (Document                        | Number)                |
| Certified Copies C               | Certificates of Status |
| Special Instructions to Filing C | Officer;               |
|                                  |                        |
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Office Use Only



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### **COVER LETTER**

| BIRDRO<br>SUBJECT:          | CK GLOBAL CONSULTING                              | GROUP, LLC  |                     |               |     |
|-----------------------------|---|---|---------------------|---------------|-----|
|                             | Name of Lin                                       | nited Liability Company   |                     |               |     |
| The enclosed Articles of    | Amendment and fee(s) are sub                      | omitted for filing.   |                     |               |     |
| Please return all correspo  | ondence concerning this matter                    | to the following:   |                     |               |     |
|                             | GUY D. SPERDUTO                                   |   |                     |               |     |
|                             | GUY D. SPERDUTO, CP                               | Name of Person<br>A, PA   |                     |               |     |
|                             | 8963 STIRLING ROAD,                               | Firm/Company<br>SUITE 101   |                     |               |     |
|                             | COOPER CITY, FLORID                               | Address<br>A 33328  |                     | <b>基金 8</b>   |     |
|                             | debbie@accountinglinkusa                          | City/State and Zip Code com   |                     | DEC 2         | 7   |
| For further information of  | E-mail address: (concerning this matter, please c | to be used for future annual report not all:                        | ification)          | 5EF - P       | CEU |
| GUY D. SPERDUTO             |   | 954 432-0272<br>at ( )  |                     | M 6: 17       |     |
| Name o                      | of Person   |   | ne Telephone Number | <del></del>   |     |
| Enclosed is a check for the | he following amount:                              |   |                     |               |     |
| \$25.00 Filing Fee          | □ \$30.00 Filing Fee & Certificate of Status      | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified (         | e of Status & |     |
|                             |   |   |                     |               |     |

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

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

#### BIRDROCK GLOBAL CONSULTING GROUP, LLC

| (Name of the Limited Liability Compa-<br>(A Florida Limited L   | ny as It now appears on our reco<br>liability Company)  | ords.)   |
|---|---|--|
| The Articles of Organization for this Limited Liability Company Florida document numberL17000236542   | were filed on   | 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:                                      |  |
| CASCARILLA GROUP, LLC   |   |  |
| The new name must be distinguishable and contain the words "Limited Liabil  | ity Company," the designation "L                        | LC" or the abbreviation "L.L.C."                           |
| Enter new principal offices address, if applicable:   |   | <del></del>  |
| (Principal office address MUST BE A STREET ADDRESS)   | NIH   |  |
|   |   | <u>&gt;</u>  |
|   |   |  |
| Enter new mailing address, if applicable:   | 1   | 26   |
| (Mailing address MAY BE A POST OFFICE BOX)  | 1/12  |  |
|   |   | ပ္သံု့ တူ  |
|   |   | 17   |
| B. If amending the registered agent and/or registered of  |   | ds, enter the name of the nev                              |
| registered agent and/or the new registered office address here  | <b>:</b>  |  |
| Name of New Registered Agent:   | $\frac{1}{n}$   |  |
| Name of New Registered Agent.   | <del></del>   |  |
| New Registered Office Address:  | E . Cl  |  |
|   | Enter Florida street add                                | ress   |
|   | , l   | Florida  |
| New Registered Agent's Signature, if changing Registered Agent:   | Cuy   | zip Code   |
|   |   |  |
| I hereby accept the appointment as registered agent and agre<br>provisions of all statutes relative to the proper and complete<br>accept the obligations of my position as registered agent as p<br>being filed to merely reflect a change in the registered office<br>company has been notified in writing of this change. | performance of my duties,<br>rovided for in Chapter 603 | and I am familiar with and 5, F.S. Or, if this document is |
|   |   |  |

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:

| <u>Title</u>   | <u>Name</u> | Address MA | Type of Action |
|----------------|-------------|------------|----------------|
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| Effec       | tive date, if other than the date of filing: (optional) (optional) (feetive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Fursuant to 605.020 |
| <u>Note</u> | If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not believed as   |
| docu        | nent's effective date on the Department of State's records.   |
|             |   |
| the re      | cord 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.   |
| , , , , ,   | e 90th day after the record is filed.   |
| Data        | <b>/</b> /  |
| Dated       |   |
|             |   |
|             | Signature of a member of authorized representative of a member  |
|             |   |
|             | Guy D. Sperdato   |

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Filing Fee: \$25.00