

L17000 237999

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

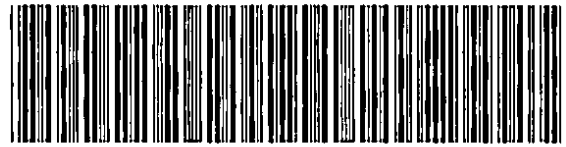
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL - 1 2019  
T SCHROEDER



**THE ORLANDO  
LAW GROUP, PL**  
*A Private Law Firm*

*12301 Lake Underhill Road, Suite 213  
Orlando, Florida 32828*

*Tel: 407.512.4394  
Fax: 407.955.4654*

June 13, 2019

Division of Corporations  
Registration Section  
Post Office Box 6327  
Tallahassee, FL 32314

**Re: Executive Business Advisors LLC amendment**

To Whom It May Concern:

Enclosed please find the original Articles of Amendment and the corresponding fee of \$25.00 for **Executive Business Advisors LLC**. Kindly process the Amendment and contact my office at the above listed telephone number if any questions or concerns arise.

Thank you for your assistance.

Sincerely,

Jennifer A. Englert

JAE: cft

Enclosures

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

Executive Business Advisors LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on November 17, 2017 and assigned  
Florida document number L17000237999.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Amson Consulting LLC

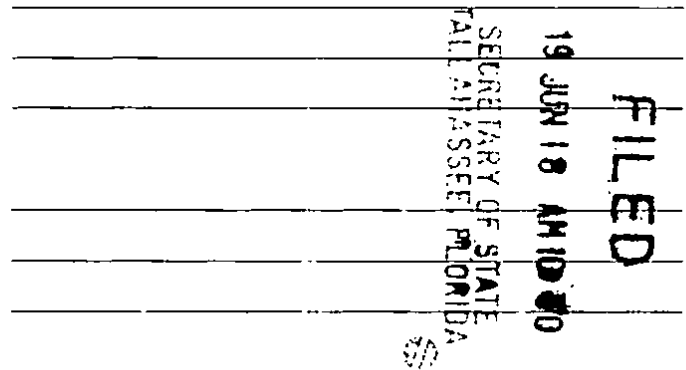
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**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)**



**B. If amending the registered agent and/or registered office address on our records, enter the name of the new 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

**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

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> | <u>Address</u> | <u>Type of Action</u>           |
|--------------|-------------|----------------|---------------------------------|
| _____        | _____       | _____          | <input type="checkbox"/> Add    |
|              |             | _____          | <input type="checkbox"/> Remove |
|              |             | _____          | <input type="checkbox"/> Change |
| _____        | _____       | _____          | <input type="checkbox"/> Add    |
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(If an effective 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)(b)

(b) The 90th day after the record is filed.

Dated 12th June, 2019

  
Signature

Signature of a member or authorized representative of a member

Sanjay Parekh, Manager

Typed or printed name of signee