1800019219

	1		
		(Requestor's I	lame)
ļ		(Address)	
		(Address)	
		(City/State/Zp/	NT MAIL
1		(Business Ehti	
C	eitii	(Document Nu	mber) ficates of Status
	Spe	ecial Instructions to Filing Office	er:
		Office U	se Only



900310697109

03/20/18--01025--010 **25.00

FLORIDA SECI

N COOPER MAR 2 1 2018 SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER Registration Section Division of Corporations MIAMI CONSUNTING PARTNERS LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: RODRIGUEZ, JUAN C Name of Person MIAMI CONSUNTING PARTNERS LLC Firm/Company 7001 WEST 35 AVE APT 237 Address HIALEAH, FL 33018 City/State and Zip Code VELAZQUEZGMULTISERVICES@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RODRIGUEZ, JUAN C Name of Person Daytime Telephone Number **Enclosed** is a check for the following amount: \$25.00 Filing Fee ☐ \$3**0**.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ш	<u> </u>	\'	
	MIAMI CONSUN	TING PARTNERS LLC	
	1	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
- 14		or this Limited Liability Company were filed on 01/22/2018 and assign	ed
F	orida document number L180	00019219	
П	nis amendment is submitted to	amend the following:	
Ą	If amending name, enter t	the new name of the limited liability company here:	
į			
rī	enew name must be distinguishab	e and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C.	,
Ę	nter new principal offices ac	ddress, if applicable:	A SE
É	rincipal office address MUS	T BE A STREET ADDRESS)	L _R E
		1	ŽZT:
			32,35
_]	
П	nter new mailing address, if		
4	Igiling address MAY BE A F	POST OFFICE BOX)	OR ID
		<u></u> .	7>
		ered agent and/or registered office address on our records, enter the name of	the new
<u>re</u>	gistered agent and/or the ne	w registered office address here:	
ĺ		5	≱.SE
	Name of New Registe	ered Agent:	<u> </u>
	Now Registered Office	1	
İ	New Registered Office	Enter Florida street address	<u>~×</u> ,≈
ı		<u> </u>	교육은
		, Florida	_
			ŽÃ.
<u>N</u>	w Registered Agent's Signate	are, if changing Registered Agent:	*
		nent as registered agent and agree to act in this capacity. I further agree to comply	
		live to the proper and complete performance of my duties, and I am familiar with a	
		position as registered agent as provided for in Chapter 605, F.S. Or, if this docume	ent is
	nng juea to merety rejiect a mpany has been notified in	change in the registered office address, I hereby confirm that the limited liability withing of this change	
	I I want to the many tea the	Thing of this change.	
			_
		If Changing Registered Agent, Signature of New Registered Agent	
	11		

 	Authorized Person(s) authorize	d to manage, enter the title, name, and addre	ess of each nerson, being added
removed 	from our records	to manage, enter the thie, mane, and addre	gs of each person being added
itle	<u>Name</u>	<u>Address</u>	Type of Action
ACR	LORENZO, FELIX C	7001 W 35 AVE APT 237	□ Add
		HIELEAG, FL 33018	■ Remove
			□ Change
		_	□ Add
			Remove
			Change
			□ Add
			☐ Remove
 -			Change
			Add
			☐ Remove
			Change
			Remove
		<u> </u>	Change
() :			Remove
			Change

1			
D.	If amending any other info	rmation, enter change(s) here: (Attach additional sheets, if necessary.)	
	· ·		-
			-
			-
		· · · · · · · · · · · · · · · · · · ·	-
			-
			Z S
			CRE LL AH
			TARY ASSE
			TATE ORID/
			. ₹s
			ECRE
			TARY ASSE
E	Effective date, if other than	of the date of filing: (optional)	. ,
	If an effective date is listed, the da Note: If the date inserted in the	the must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 his block does not meet the applicable statutory filing requirements, this date will not be list the Department of State's records.	
If,	الدناس بالمساحات	ayed effective date, but not an effective time, at 12:01 a.m. on the earlierecord is filed.	ier of:
	Dated	· · · · · · · · · · · · · · · · · · ·	
	A = A	eran Radriguez	
	BODBIGUEZ II	Signature of a member or authorized representative of a member	
	RODRIGUEZ , JU	Typed or printed name of signee	
i		Page 3 of 3	

Filing Fee: \$25.00