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2019

### **COVER LETTER**

TO: Registration Section Division of Corporation	s		
SUBJECT:GW	E CANSUL I Name of Limited I	7 N G Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  GERMO EDDY  Name of Person  GWE Con Suctive Firm/Company  2761 NE 58 ST  Address  Four Limber Date Fl 3330 f  City/State and Zip Code  GWE Con Sulting Quahoo. Com  Ji-mail address: (to be used for fugire annual report notification)  For further information concerning this matter, please call:			
Please return all correspondence co	oncerning this matter to th	e following:	
	GERACI	o Eppy	
		SULTING	
	_	- 1 /	
	2761 NE	Address	
	For LAND	EXDACE, FL 3:	330f
For further information concerning	this matter, please call:		
GENNO E Name of Person	EDOY	at ( <u>954</u> ) <u>632 - 9</u> Area Code Daytime Tele	769 ephone Number
Enclosed is a check for the following	ng amount:		
	0.00 Filing Fee & E ertificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

#### 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

GWE CONSULTING

(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.)	
	Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 1/23/2019	and assigned
	were med on	and assigned
Torida document number <u>LISOOO 2073O</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS		1
		<del></del>
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		<del></del>
Mulang undress MAT BEAT OST OTTICE BOA		<del>`</del>
If amonding the registered agent and/or registered a	Office address on our records and	
		er the name of the n
3. If amending the registered agent and/or registered or registered or registered agent and/or the new registered office address here.		
egistered agent and/or the new registered office address her		er the name of the n
egistered agent and/or the new registered office address her	<u>.e</u> :	19 JUL -5
egistered agent and/or the new registered office address here.  Name of New Registered Agent:		19 JUL -5 A
egistered agent and/or the new registered office address here.  Name of New Registered Agent:	Enter Florida street address Florida	19 JUL -5 AH IB
egistered agent and/or the new registered office address here.  Name of New Registered Agent:	Enter Florida street address  Florida  City	19 JUL -5 A

If amending or removed	g Authorized Person(s) authorized to п from our records:	nanage, enter the title, name, and address of	each person being added
MGR = M AMBR = A	lanager Authorized Member		I
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MICHEUR EDDY	STG/ NE 58 ST Four LOUDENDAME, E/ 33	Add
		For Lousenome, 6/33	345 □ Remove
		<del></del>	☐ Change
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an effective date is list of the date in t	ther than the date of fi sted, the date must be specific serted in this block does no	and cannot be prior to coor meet the applicable	date of filing or more thate statutory filing requ	(optional) n 90 days after filing.) Pursu rements, this date will no	ant to 605,0201 of be listed as
cument s effective	e date on the Department of	of State's records.			
record specifi The 90th day a	es a delayed effective after the record is file	e date, but not a	in effective time,	at 12:01 a.m. on th	e earlier o
ited	13/19 7/3	2019			
			-		
		/ \			
<u>-</u>	Signature o	f a member or authorize	ed representative of a me	ember	

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Filing Fee: \$25.00