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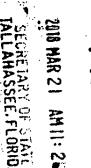
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S. WARREN MAR 2 2 2018

COVER LETTER

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	Marchant (Global Consultants Firm LLC	+ 4			
SUBJECT:						
Name of Limited Liability Company						
The er	nclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please	e return all correspo	ondence concerning this matter	to the following:			
		Nicholas Paladino				
			Name of Person			
	Merchant Global Consultants Firm LLC Firm/Company 1782 58th Circle South					
			Address			
	ST PETERSBURG, FL 33712 City/State and Zip Code nickpala25@gmail.com					
		- -	to be used for future annual report notifi	cation)		
For fu	rther information c	oncerning this matter, please c	all:			
Nicho	las Palaclino	***************************************	631 766-8253			
		f Person		Telephone Number		
Enclos	sed is a check for the	ne following amount:				
≘ \$2	5.00 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)		
	MAIL	ING ADDRESS:	STREET/COURIE	R ADDRESS:		

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 3230.1

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MERCHANT GLOBAL CONSULTANTS FIRM 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 $\frac{03/05/2018}{1}$ and assigned Florida document number CP 575 G This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Merchant Bankcard Purchase Consultants Firm LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 "

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 liable y company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agen

Page 1 of 3

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 = Manager

AMBR = Authorized Member **Title** <u>Name</u> **Address Type of Action** □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change _□ Add _□ Remove _ Change _□ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change Page 2 of 3

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record specifies a delayed effe	ective date, but not an effective time, at 12:0	01 a.m. on the earlier
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Filing Fee: \$25.00