P.001/005

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BLALOCK, WALTERS, HELD & JOHNSON, P.A.

Account Number : 076666003611

Phone Fax Number

: (941)748-0100 ·: (941)745-2093

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SIENA CONSULTING GROUP, LLC

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Estimated Charge		\$25.00

Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

TO:	-	stration Section ision of Corporations				
SUBJE		NA CONSULTING	GROUP, LLC			
			N			

Name of Limited Liability Company

Please return all corre	spondence concerning this matter to the following:
	Kristen H. Ehrlich, Esq.
	Name of Person
	Blalock Walters, P.A.
	Firm/Company
	802 11th Street West
	Address
	Bradenton, FL, 34205
	City/State and Zip Code
	_epennington@blalogkwalters.com
	E-mail address: (to be used for future annual report notification)

Kristen Ehrlich	. '	941	748-0100
		at () <u></u>
Name of Person	•	Area Code	Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 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)

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

04/29/2019 15:01 Blalock Walters

(((H19000141479 3)))

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

(Name of the Limited Liabil) (A Florid	ity Company as it nov a Limited Liability Cor	appears on our recor	<u>ds.</u>)	- ·
The Articles of Organization for this Limited Liability (Company were filed	on 01/07/2019		and assigned
			,	
Florida document number L19000008378	 -			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	ited liability comp	any here:	 _ ,	••
The new name must be distinguishable and contain the words "Lir	nited Liability Compan	y," the designation "UL	C' or the abbre	Viation "L.L.C."
Enter new principal offices address, if applicable:				<u> </u>
Principal office address MUST BE A STREET ADD.	RESS)		• .	~
			r kilopera e	
	: -			
Enter new mailing address, if applicable:				·
(Mailing address MAY BE A POST OFFICE BOX)				•
				
	· · · · · · · · · ·	<u> </u>		
			•	•
B. If amending the registered agent and/or regi		ess on our record	ls, enter the	e name of the
registered agent and/or the new registered office add	ress here:			
· .	-	•		
Name of New Registered Agent:	·			
		<u> </u>		
New Registered Office Address:	<u> </u>			
·	Es	ster Florida street oddre	'5\$	
		r	lorida	
	Cin	, F		Ziv 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

(((H19000141479 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

<u>Title</u>	Name		Address	Type of Action
MGR	MARYANN DESARRO	_	12007 GOLDENROD AVE BRADENTON, FL 34212	
				. · · · · -
,				□ Remove
				☐ Change
MGR	DOMINICK DESARRO		12007 GOLDENROD AVE BRADENTON, FL 34212	53. □ Add
				☐ Remove
				☐ Change
	<u> </u>	<u> </u>		□ Add
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effective date i	if other than t is listed, the date t	nrust be specifi	cand campo	t be prior t	o date of filin	g or more the	n 90 days e	ifter filing	g.) Pursuant
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Filing Fee: \$25.00