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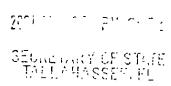
COVER LETTER

TO: Registration Se Division of Cor			
MD Group	Consulting LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fec(s) are subs	mitted for filing.	
Please return all correspo	endence concerning this matter	to the following:	
	ltsik Trabelsi	_	
		Name of Person	
	LIT Advisory Group		
		Firm/Compeny	
	21300 Victory Blvd STE	660	
	···	Address	
	Woodland Hills, CA 9136	7	
		City/State and Zip Code	
	itsik@litadg.com		
	E-mail eddress: (to be used for future annual report notifi	Cation)
For further information of	oncerning this matter, please co	all:	
Itsik Trabelsi		646 465-1085 at ()	<u></u>
Name o	f Person	Area Code Daytime	: Telephone Number
Enclosed is a check for th	e following amount:		
≡ \$25.00 Filing Fee	S30.00 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)
<u>Malling Address</u> Registration S		Street Address: Registration Se	ction
	. •	Di line of Con	mantions

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

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



(Name of the Limited Liability Company and Item streets and set processes) (A Fiorda Limited Liability Company) (A Fiorda Limited Liability Liability Company) (A Fiorda Liability Liability Liability Company) (A Fiorda Liability Liability Liability Company) (A Fiorda Liability Liab	MD Group Consulting LLC	Lability Company as it now appears on our records.)
is amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: If amending name, enter the new name of the limited liability company here: If amending name, enter the new name of the limited liability company," the designation "LLC" or the abbreviation "LLC." Iter new principal offices address, if applicable: included office address MUST BE A STREET ADDRESS) If amending the registered agent and/or registered office address on our records, enter the name of the new registered at and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address Enter Florida street address Enter Florida street address To be abbreviation "LLC." If under the new registered Agent: New Registered Office Address Enter Florida street address To be abbreviation of the new registered agent and agree to act in this capacity. I further agree to comply with the visions of all stantates relative to the proper and complete performance of my duties, and I am familiar with and agent the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or. if this document is up filed to merely reflect a change in the registered agent as provided for in Chapter 605, F.S. Or. if this document is up filed to merely reflect a change in the registered agent as provided for in Chapter 605, F.S. Or. if this document is	(A sine of the Landers	Florida Limited Liability Company)
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	reputity rads begin restificat in writing by this Cra	urugo.

If Changing Registered Agent, Signature of New Registered Agent

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

Tipe	Name	Address	Type of Action
MGR	Asaf Coben	5819 Indington drive, Houston TX 77035	□ Add
			BRemove
	;		Change
	i		C Add
	:		Remove
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	oparation of ball 3 looks	.	
ecord specifies a delayed effection is filed.	re date, but not an effective t	time, at 12:01 a.m. on the c	arlier of: (b) The 90th day after t
August 3rd	2021		
	,	·	
	Signature of a member or aut		