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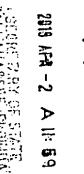
(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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APR 1 2 2019 T. LEMIEUX

COVER LETTER

TO: Registration Division of C	i Section Corporations		
	JE OF NAME		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles	s of Amendment and fee(s) are sub	nitted for filing.	
Please return all corre	espondence concerning this matter	to the following:	
	PATRICE MINORETTI		
		Name of Person	
	BULL CONSULTING LL	С	
		Firm/Company	
	544 NW 49TH STREET		
		Address	
	MIAMI , FLORIDA 33127	7	
	ardtrades@aol.com	City/State and Zip Code	
	E-mail address: ()	to be used for future annual report	notification)
For further information	on concerning this matter, please co	ntt:	
Joseph Ross		786 853-308	
Nar	ne of Person	Area Code Da	ytime Telephone Number
■ \$25.00 Filing Fed	for the following amount: e 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)
M	AILING ADDRESS:	STREET/CO	URIER 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 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BULL CONSULTING LLC

2019 AFR -2 A II: 59

(Name of the Limited Liability Compa (A Florida Limited I	Liability Company) SEGRETARY OF STARS	
(Name of the Limited Liability Compa (A Florida Limited I The Articles of Organization for this Limited Liability Company Florida document number 119000023489	FALLAHASSEE FALORIDA were filed on 01/22/2019 and assign	ied
Florida document number 119000023489		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
BULL ASSOCIATES AND CONSULTING LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C	-
Enter new principal offices address, if applicable:	7814 NE 4TH COURT	
(Principal office address MUST BE A STREET ADDRESS)	UNIT 103	
	MIAMI FLORIDA 33138	
Enter new mailing address, if applicable:	7814 NE 4TH COURT	
	UNIT 103	
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FLORIDA 33138	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent:		the nev
New Registered Office Address:		
	Enter Florida street address	
	Florida	
	City Zip Code	
New Registered Agent's Signature, if changing Registered Agent:	<u>.</u>	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	performance of my duties, and I am familiar with a	ınd

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

Manager Authorized Member		
Name	<u>Address</u>	Type of Action
		□ Add
		Remove
		Change
		Remove
		☐ Change
		\ \ \ \
		Remove
		Change
		☐ Remove
		Change
		□ Remove
		☐ Change
		Remove
		☐ Change
	Manager - Authorized Member Name	Authorized Member

FINANCIAL INTEREST IN	THE DESIGNS OF THE COMPANY.
	
	
ective date, if other than the	03/27/2019 date of filing:
reflective date is listed, the date must	st be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 lock does not meet the applicable statutory filing requirements, this date will not be list
cument's effective date on the De	
record specifies a delayed	d effective date, but not an effective time, at 12:01 a.m. on the ear
he 90th day after the reco	ord is filed.
MARCH 28	2019
ied	
` D ./	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00