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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	TIAW [MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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	Registration So Division of Co			
SUBJEC'	MINTON (CONSULTING LLC		
SUBJEC	·	Name of Lim	ited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	ırn all correspo	ondence concerning this matter	to the following:	
		BARBARA MINTON		
		MINTON CONSULTING	Name of Person LLC	
		250 ATLANTIC DR	Firm/Company	
		MELBOURNE BEACH F	Address L 32951	
			City/State and Zip Code	
.			to be used for future annual report notif	ication)
		concerning this matter, please ca		
BARBAR	A MINTON		828 850-0899 at ()	
	Name o	f Person	Area Code Daytime	: Telephone Number
Enclosed i	s a check for th	he 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:

TO:

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

MINTON CONSULTING LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our record Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Company	were filed on 07/12/2019	and assigned
Florida document number 119000180263		_
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC	O" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	<u></u>	20
		AL IS
		III AUG 23 PH
Enter new mailing address, if applicable:	-	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		Si PH III
		7/1
		. Q
If amending the registered agent and/or registered of egistered agent and/or the new registered office address here	fice address on our record	s, enter the name of the
egistered agent and/or the new registered office address here	<u>:</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
registered office Address.	Enter Florida street addre:	NN.
	FI	lorida
	City	Zip 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

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>	<u>Name</u>	Address	Type of Action
AR	REX I MINTON, JR	250 Atlantic Dr. Melburne Beach, FL 32951	Add
			■ Remove
			Change
MGR BARBARA MINTON	BARBARA MINTON	250 ATLANTIC DR MELBOURNE BEACH, FL 38951	Add
			□ Remove
			Change
			Add
			☐ Remove
			Change
			Remove
			Change
			Add
			Pemove
			Change
			□ Remove

(If an) <u>Note</u>	effective date, if other than the date of filing:
If the r (b) Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier ne 90th day after the record is filed.
Date	A CA (Hugust) 21. 2019. A Minter Signature of a member or author/zed representative of a member

Page 3 of 3

Filing Fee: \$25.00