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COVER LETTER

Enclosed is a check for the following amount: S25.00 Filing Fee S30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee.	TO: Registration Section Division of Corporation				
Please return all correspondence concerning this matter to the following: Andrew Toledo Consulting LLC Firm/Company 3230 W. Grow 5+ Address Tamos / Florids 33614 City/State and Zip Code Andrew Toledo Consulting E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Andrew Toledo Name of Person at (813) 416 - 5842 Name of Person Enclosed is a check for the following amount: S25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee.	SUBJECT: <u>Andrew</u>	Toledo Consult Name of Limi	tion LLC ited Liability Company		
Andrew Toledo Consultivo 440 Firm/Company 3230 W. Grove 57 Address Tamoa Florida 33614 City/State and Zip Code Andrew M 7 711 @ outlook . Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Andrew Toledo 1842 Name of Person 1855.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee.	The enclosed Articles of Art	endment and fee(s) are sub	mitted for filing.		
Andrew Tolede Consulting LLC Firm/Company 3230 W. Grove 57 Address Tanox / Florida 33614 City/State and Zip Code Andrew Mt 711 @ oxtlock.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Andrew Tolede Name of Person at (813) 416 - 5842 Area Code Daytime Telephone Number Einclosed is a check for the following amount: S25.00 Filling Fee \$ \$55.00 Filling Fee & \$560.00 Filling Fee.	Please return all corresponde	ence concerning this matter	to the following:		
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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 Tailahassee, FL 32301

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HAdrew Tolevo Cons	Uting 66C	Name and the A
Mame of the Limited Liabi (A Flori	da Limited Liability Company)	1 our records.)
The Articles of Organization for this Limited Liability Florida document number 419000197964	Company were filed on <u>Av</u>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lir	nited liability company here	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	 .	
(Principal office address MUST BE A STREET ADD	ORESS)	÷.:. 9
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SEP -9 M 7: 09
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad Name of New Registered Agent: New Registered Office Address:	dress here:	J
		, Florida
	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 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

MGR = Manager AMBR = Authorized Member **Type of Action** <u>Title</u> Name | <u>Address</u> MGR Andrew Toledo 3230 W. GOIC St, TAMPS, FL 33614 TAdd ☐ Remove _□ Change _□ Add _□ Remove _□ Change □ Add ☐ Remove ☐ Change _□ Add □ Remove □ Change □ Add ☐ Remove _□ Change □ Add ☐ Remove ☐ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being at

or removed from our records:

Effective date, if other than the date of filing: Optional) Office officeive date, is faced, the date must be specific and cumon be prior to date of filing or more than 90 days after filing.) Pursuant to 605 020. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The 90th day after the record is filed. Dated September 4th 2019 Signature of a rhember or authorized representative of a member Andew To Jewo	_	
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Andrew Toledo		Signature of a member or authorized representative of a member
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D. Trainfending any other information, effect change(s) here. (Antach datafolda sheets, if necessary.)

Page 3 of 3

Filing Fee: \$25.00