Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)962-3889

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

Email	Address:	

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN OPEN ROAD CONSULTANTS LLC

Certificate of Status	0
Certified Copy	1
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OCT 081

TO:

Registration Section

## **COVER LETTER**

Division of Cor	rporations			
OPEN RO	OPEN ROAD CONSULTANTS LLC			
SUBJECT:	Name of Limi	ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.		
Please return all corresp	ondence concerning this matter t	to the following:		
	Cheyenne Moseley			
		Name of Person		
	Legalzoom.com, Inc.			
	Firm/Company			
	101 N Brand Blvd 11th Fl			
		Address		
	Glendale, CA 91203		;	
		City/State and Zip Code	;	
	openpathpartners@gmail.co		;	
r ea ie v.		o be used for future annual report notific		
rot mitner mormation	concerning this matter, please or			
Cheyenne Moseley		800 773-0888 at ( )		
Name	of Person	Area Code Daytime	Felephone 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)	S60.00 Filing Fee Certificate of Sta Certified Copy (additional copy is e	

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OPEN ROAD CONSULTANTS E			
(Name of the Limit	ed Liability Comp (A Florida Limited	onny as it now appears on our record I Liability Company)	<u>(s.</u> )
The Articles of Organization for this Limited L Florida document number <u>L19000215989</u>	iability Compan	ny were filed on	•
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	<u>f the limited lia</u>	hility company here:	
The new name must be distinguishable and contain the v	vords "Limited Liab	bility Company," the designation "LLC	or the abbrevia
Enter new principal offices address, if applic	able:		<u> </u>
(Principal office address MUST BE A STREE	ET ADDRESS)		
			ì
			· ·
Enter new mailing address, if applicable:			i
	P(IV)		
(Mailing address MAY BE A POST OFFICE	<u>HOAJ</u>		<u> </u>
			·
B. If amending the registered agent and registered agent and/or the new registered o	or registered ffice address he	office address on our recordere:	ls, <u>enter the</u>
Name of New Registered Agent:			
New Registered Office Address:		Enter Floridastrect addre	
		гунег у когназы еги шки е.	ນ
			lorida
		Ciry·	2.

## 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 provisions of all statutes relative to the proper and complete performance of my duties, and I am famil, accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if the being filed to merely reflect a change in the registered office address, I hereby confirm that the limited company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Register

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each per or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	<u>r</u>
AMBR	Fried, Jacob G		
		3416 Pine Haven Circle Buca Raton, FL 33431	
AMBR	lan Katz	497 South West 29th Ave. Defray Beach, FL 33445	
AMBR	Evan C. Stahl		· · ·
		3416 Pine Haven Circle Boca Raton, FL 33431	1
			:
			[
			[

To: ATTN: Business Filings Page 6 of 6

2019-10-02 17:50:48 (GMT)

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. If amendi	ng any other information, enter change(s) here: (Attuch o	additional sheets, if necessary.)
<u></u>		
•		
******		:
<del></del>		<u> </u>
		<u>i</u>
Note: Ift	dute, if other than the date of filing: so due is listed, the date must be specific and cannot be prior to date of fill he date inserted in this block does not meet the applicable statuto a effective date on the Department of State's records.	(optional) ng or more than 90 days after filing.) Pursuant to ry filing requirements, this date will not be l
the record	d specifies a delayed effective date, but not an effective day after the record is filed.	tive time, at 12:01 a.m. on the ea
Dated	October 1. 2019.  EVAL C. Standard representation of a subharized representation of a subhari	entative of a member
	Evan C. Stahl	
	Typed or printed name of s	gnet
	Page 3 of 3	

Filing Fee: \$25.00