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SECRETARY OF STAIL
STAIL SCHORATIONS
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Name Change

APR 07 2020 D CUSHING

COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT:	FITZPATRICK	CONSULTING :LLC	2	
		ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	DANIEL	J FITZPATRIC Name of Person	K	
		Firm/Company		
	13750 W	Colonia C DR. Address		
	WINTER GA	City/State and Zip Code	7	
		Janegmail.Com to be used for future annual report noti	fication)	20 tP3
DANIEL J. F.	oncerning this matter, please ca		9104	6P2 -1 FHII: 0
	f Person	at (<u>407</u>) <u>279</u> - Area Code Daytim	e Telephone Number	1: 0
Enclosed is a check for the	ne 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 Sta Certified Copy (additional copy is e	atus &
Mailing Address Registration S Division of C	Section orporations	Street Address: Registration Se Division of Co	porations	
P.O. Box 632	. 1	The Centre of T	arranassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FITZPATRICK CONSULTING LLC

(A Florida Limited Li	ability Company)	
The Articles of Organization for this Limited Liability Company v Florida document number $\underline{L200000712}$.	were filed on DECEMBER 30, 2	0/9 and assigned
This amendment is submitted to amend the following:		20 21/15 21/15
A. If amending name, enter the new name of the limited liabil		DAFTER TO THE TENT
MANUFACTURING ENTERPRISE SULUTION The new name must be distinguishable and contain the words Limited Liability	ty Company," the designation "LLC" or the	abbreviation "L.L.C." Solution
Enter new principal offices address, if applicable:		AF INCHES
(Principal office address MUST BE A STREET ADDRESS)		0 ===
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office adapted and/or the new registered office address here:	ddress on our records, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	Enter Florida street address	
	, Florida	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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	·
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(If an e Note	ffective date, if other than the date of filing:
he rec ord is	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the filed.
Date	A FEBRUARY 18 2020
	Daniel 9. Fits Strik Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	DANIEL J. FITZPATRICK