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08/10/21--01024--017 **25.00

08/11/21

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 5 Crows Consulting LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Filing Jesse K

Name of Person

ZenBusiness Inc

Firm/Company

5511 Parkercrest Dr., Ste. 207

Address

Austin, TX 78731

City/State and Zip Code

compliance@zenbusiness.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jesse K

844

4936249

at (_____) _____

Name of Person

Area Code

Daytime Telephone 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)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 210
Tallahassee, FL 32310

4/11/24

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>	<u>Address</u>	<u>Type of Action</u>
Member	Michael Lynch	2729 Nicole Circle	<input type="checkbox"/> Add
		Palm Harbor, FL 34684	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
Member	Cory Lynch	2102 Gore Dr	<input type="checkbox"/> Add
		Haymarket, VA 20169	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated August 5 2021

Michael Lynch
Signature of a member or authorized representative of a member

Michael Lynch

Typed or printed name of signee