LZ0 000030451

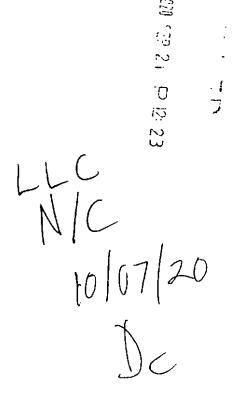
(Re	questor's Name)
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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Division of Corporations

August 27, 2020

VANESSA JOHNSON 357 ALMERIA AVE. #1501 CORAL GABLES, FL 33134

SUBJECT: DOT COM CONSULTING LLC

Ref. Number: L20000030451

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is F18000005234.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 120A00016453

Darlene Connell
Regulatory Specialist II Supervisor

www.sunbiz.org

COVER LETTER

Division of Corporations
SUBJECT: Dot COM 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:
Vanessa Johnson Name of Person
Firm/Company
357 Almeria Ave #1501
Coral Gabies, FL 33134 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Vanessa Johnson at (949) 842 - 9863 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\sum \$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status \$\sum \text{Certified Copy} \text{(additional copy is enclosed)} \$\sum \text{Certified Copy} \text{(additional copy is enclosed)}\$

Mailing Address:

Registration Section

TO:

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 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dot Com Consulti	na LLC.		\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.
Dot Com Consults (Name of the Limited Liability C (A Florida Lin	omputny as it now ap nited Liability Compa	pears on our records.) ny)	- w
The Articles of Organization for this Limited Liability Complete Horida document number \(\frac{\tag{2000030451}}{\tag{51}}\).		_	and assigned
Florida document number LZWWWW 5V4 51.			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability compan	y here:	
Click Labs Developm	ent LLC	,	
The new name must be distinguishable and contain the words "Limited	Liability Company," t	he designation "LLC" or the at	obreviation "L.L.C."
Enter new principal offices address, if applicable:		NO Change	
(Principal office address MUST BE A STREET ADDRES	<u>s)</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		No charge	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on ou	or records, <u>enter the nam</u>	<u>ie of the new registere</u>
Name of New Registered Agent:	NO CY	iange	
New Registered Office Address:	Enter	Florida street address	
		, 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 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 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
		No changes	🖸 Add
			□ Remove
			□Change
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Effective date, if	other than the date of filing: (optional)
	other than the date of filing: (optional) isted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (
	serted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to we date on the Department of State's records.
•	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
rd is filed.	
Dated	1 1st 2020 1
	Various Johan
	Various Johan
	Signature of a member or bathorized representative of a member
	Vanessa Johnson Typed or printed name of signee
	14.1077

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