# LZC CCC 137333

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### **COVER LETTER**

TO:						
eup ic	El	LEVATE C	ONSULTING GURUS, LLC			
SUBJE	CI:		Name of Limit	ed Liability Company		<del></del>
				_		
	Registration Section Division of Corporations  ELEVATE CONSULTING GURUS, LLC  Name of Limited Liability Company  enclosed Articles of Amendment and fee(s) are submitted for fitting.  ser return all correspondence concerning this matter to the following:  GIUSEPPINA WEITZEL  Name of Person  ELEVATE CONSULTING GURUS, LLC  Firm/Company  10627 Buttonwood Lake Dr  Address  Boca Raton, FL 33498  City/State and Zip Code  joweitzel,work@gmail.com  E-mail address: (to be used for future annual report notification)  further information concerning this matter, please call:  seppina Weitzel  Name of Person  Area Code  Daytime Telephone Number  losed is a check for the following amount:  \$25.00 Filling Fee  Certificate of Status  Certified Copy (radditional copy is enclosed)					
				Name of Person		
			ELEVATE CONSULTING	GURUS, LLC		
				Firm/Company	Daytime Telephone Number  Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy	
			Name of Limited Liability Company  Amendment and fee(s) are submitted for filing.  Idence concerning this matter to the following:  GIUSEPPINA WEITZEL  Name of Person  ELEVATE CONSULTING GURUS, LLC  Firmt/Company  10627 Buttonwood Lake Dr  Address  Boca Raton, FL 33498  City/State and Zip Code  joweitzel.work@gmail.com  E-mail address: (to be used for future annual report notification)  necerning this matter, please call:  Person  at (			
	Address					<del></del>
			Boca Raton, FL 33498			
				City/State and Zip Code	!	<del> </del>
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For furt	her info	rmation con			report nouneación)	
Giusepp	oina We	itzel			11-0345	
		Name of P	Person		Daytime Teleph	one Number
Enclose	d is a cl	neck for the	following amount:			
□ \$25	.00 Fili	ng Fee	Certificate of Status	Certified Copy		Certificate of Status & Certified Copy

TO:

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 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ELEVATE CONSULTING GURUS, LLC		
( <u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number 1.20000137333	mpany were filed on 05/20/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed_liability company here:	
The new name most be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC" of	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u> </u>	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		AHAR
(Mailing address MAY BE A POST OFFICE BOX)		M M
		~ <b>≥ 3</b>
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records, <u>enter th</u>	e name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
	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 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>	Address	Type of Action
AMBR	Giuseppina Weitzel	10627 Buttonwood Lake Dr	
		Boca Raton, FL 33498	□Remove
			<b>■</b> Change
			□Remove
			SECRETION OF TARRET
			AHASSEE, FL
			□Add
			□Remove
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If an effective date is listed, th Note: If the date inserted document's effective date	e date must be specific in this block does r	c and cannot be pric not meet the appli	or to date of filing i icable statutory f	or more than 90 day	's after filing.) Pursu	ant to 605. ot be liste	.0207 (3 ed as the
ne record specifies a The 90th day after	delayed effective the record is file	re date, but n ed.	ot an effectiv	e time, at 12	:01 a.m. on th	e earlie	er of:
June 2 Dated		2020					
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Filing Fee: \$25.00