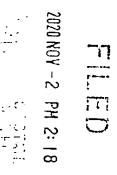
## 120000223804

Office Use Only



500354387745

11/02/20--01033--004 \*\*30.00



650 10 M

## **COVER LETTER**

	istration Se ision of Cor		•				
CUBICCT	Galaxy Cor	nsulting, LLC		* n			
SUBJECT:		Name of Lin	nited Liability Company				
The enclosed	Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return	all correspo	ndence concerning this matter	to the following:				
		Nicolle Barcenas					
			Name of Person				
		Galaxy Consulting, LLC					
		<del></del>	Firm/Company	· · · · · · · · · · · · · · · · · · ·			
		1640 E Sunrise Blvd Apt 2	2707				
		<del>.</del>	Address				
		Fort Lauderdale, FL 33304					
			City/State and Zip Code	<del></del>			
		Galaxygroupleads@gmail.c					
			to be used for future annual report no	tilication)			
For further in	nformation c	oncerning this matter, please c	all:				
Nicolle Barcenas			at () Area Code Daytime Telephone Number				
	Name o	f Person	Area Code Daytin	ne Telephone Number			
Enclosed is a	check for th	ne following amount:					
□ \$25.00 F	iling Fee	S30.00 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)			
	ling Addres		Street Address: Registration So	ection			
Division of Corporations			Division of Corporations				
	). Box 632 lahassee, l		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Galaxy Consulting, LLC						
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)					
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L20000223804}{L20000223804}$	were filed on July 28, 2020	and assigned				
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liab	ility company here:					
Galaxy Group, LLC						
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" o	r the abbreviation "L.L.C."				
Enter new principal offices address, if applicable:		202				
(Principal office address MUST BE A STREET ADDRESS)		2010 NOV				
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>				
		<u> 7r. 00</u>				
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:	nddress on our records, <u>enter th</u>	e name of the new registered				
New Registered Office Address:	Enter Florida street address					
	Photod					
<del> </del>	, Florida					
New Registered Agent's Signature, if changing Registered Agent:						
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and provided for in Chapter 605, F.	I am familiar with and S. Or, if this document is				

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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Bemove
			N N
			N Bemove
		<del> </del>	Change
			□Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
			[] Change

<del></del>		-		<del></del>			
		- <u></u>					
		<del>*</del>			<del></del>		
	<del></del>			•		<del></del>	
					<del></del>		
	<del></del>		<u>-</u>			2	
						2020 1	
						NON	
					. :	-2	ļ.
					foc	- P	
	<del></del>					<u>~~</u>	``,
		· · ·				<del></del>	
					<del> </del>		
fective date, if other than the	date of filing:			1	optional)		
in effective date is listed, the date must	be specific and can	not be prior to d	iate of filing or n	ore than 90 days	after filing \ Pr	ursuant to	605.020
ote: If the date inserted in this blocument's effective date on the De	pek does not meet partment of State	the applicables records.	e statutory film	g requirements	s, this date wi	li not be	listed a
ecord specifies a delayed effective is filed.	date, but not an o	effective time	, at 12:01 a.m.	on the earlier o	of: (b) The 9	Oth day a	fter the
, October 26	2	020					
ated		-					
		1					
	////10/1						

Filing Fee: \$25.00