

120000360064

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

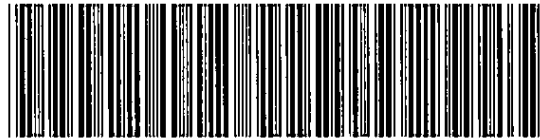
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ITASU 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:

LORRAINE E. PEREZ

Name of Person

INTERCONTINENTAL LAW FIRM, P.A.

Firm/Company

3905 NW 107TH AVENUE, SUITE 303

Address

DORAL, FL 33178

City/State and Zip Code

LPEREZ@INTERCONTLAW.COM

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

For further information concerning this matter, please call:

LORRAINE E. PEREZ

305 444-1272
at () Daytime Telephone Number
Area Code

Name of Person

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 810
Tallahassee, FL 32303

7/21/11 11:24 AM

EN

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ITASU CONSULTING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on NOVEMBER 13, 2020 and assigned
Florida document number L20000360064.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

9450 SW GEMINI DR

(Principal office address MUST BE A STREET ADDRESS)

PMB 72945

BEAVERTON, OR 97008

Enter new mailing address, if applicable:

9450 SW GEMINI DR

(Mailing address MAY BE A POST OFFICE BOX)

PMB 72945

BEAVERTON, OR 97008

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

INTERCONTINENTAL LAW FIRM, P.A.

New Registered Office Address:

3905 NW 107TH AVENUE, SUITE 303

Enter Florida street address

DORAL

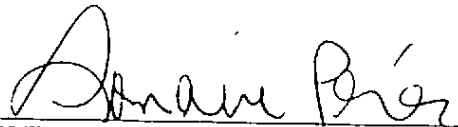
City

Florida 33178

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>	<u>Address</u>	<u>Type of Action</u>
MGR	SUSANA VIERIMAA	90 SW 3RD ST	<input type="checkbox"/> Add
		MIAMI, FL 33130	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ITALO A. CASAS	9450 SW GEMINI DR	<input type="checkbox"/> Add
		PMB 72945	<input type="checkbox"/> Remove
		BEAVERTON, OR 97008	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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(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.

Dated 05/17/, 2021

ITALO A. CASAS

Filing Fee: \$25.00