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COVER LETTER

	Registration Se Division of Cor			
CHNICA		NSULTINGS LLC		
SUBJEC	.1:	Name of Lim	ited Liability Company	
The encle	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
		ndence concerning this matter		
		DEAN SEBEA		
			Name of Person	
		ROSE AND LOTUS PRO	PERTY GROUP LLC	
		-	Firm/Company	
		1830 NE 150TH STREET	, STE 02	
			Address	
		MIAMI, FLORIDA 33181		
			City/State and Zip Code	
		DSEBE@ICLOUD.COM		
			to be used for future annual report not	tification)
For furthe	er information c	oncerning this matter, please c	all:	
DEAN S	EBEA		305 300-5766 at ()	
	Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed	is a check for the	ne following amount:		
□ \$25.0	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 Addres Registration S Division of C	Section orporations	Street Address: Registration So Division of Co	rporations
	P.O. Box 632 Tallahassee, I		The Centre of 2415 N. Monro	t affanassee be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limit	ed Liability Compa (A Florida Limited	nny as it now appears on our reco Liability Company)	ords.)	
The Articles of Organization for this Limited L Florida document number L20000363802	iability Company	were filed on 11/20/2020		_ and assigned
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	f the limited liab	ility company here:		
EKD CONSULTING LLC				
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "L	LC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applic	able:	1830 NE 150TH STREET, S	STE 02 <u>.: 0</u>	20
(Principal office address MUST BE A STREE	T ADDRESS)	MIAMI, FLORIDA 33181		23
				PR TI
Enter new mailing address, if applicable:		145 NE 135TH STREET	BSSVE TO	27 AM
Mailing address MAY BE A POST OFFICE	BOX)	MIAMI, FLORIDA 33161	5.00 -0.51 	9: 14
B. If amending the registered agent and/or ragent and/or the new registered office address		address on our records, <u>ent</u>	er the name	of the new regi
Name of New Registered Agent:	DEAN SEBEA	· · · · · · · · · · · · · · · · · · ·		
New Registered Office Address:	145 NE 135TH	STREET		
Trem registered Militer Hadress.		Enter Florida street add	ress	
	MIAMI		Florida 3316	1
	· · · · · · · · · · · · · · · · · · ·	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
MGR	DEAN SEBEA	145 NE 135TH STREET	■Add
		MIAMI, FLORIDA 33161	□Remove
			□Change
			□Add
			□Remove
			□Change
	 		
		<u> </u>	Remove
			Change
			□Add
			□Remove
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			□ Change

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Signature of a member of authorized representative of a member	ed_	
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