## L2C CCC 39C 524

(Red	questor's Name)	
(Add	dress)	
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(City	//State/Zip/Phone	#)
(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:		
(Bus	siness Entity Nam	e)
(Doc	cument Number)	<u>.</u>
Certified Copies	Certificates	of Status
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2/19/21

## **COVER LETTER**

Div	ision of Corp	perations				
CHD IFCT.	REMARKA	BLE CONSULTING GROUP	PLLC			
SUBJECT: Name of Limited Liability Company				<del></del>		
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspor	ndence concerning this matter	to the following:			
		Gary R. Burke				
		<del></del> -	Name of Person			
		REMARKABLE CONSUL	LTING GROUP LLC			
Firm/Company						
	19821 NW 2ND AVE. SUITE 404 MIAMI, FL 33169					
		<del></del>	Address			
		MIAMI/FL. 33169				
			City/State and Zip Code			
		REMCONGROUPLLC@G	MAIL.COM to be used for future annual report notif	· v		
For further in	nformation co	oncerning this matter, please ca		ication)		
Gary R. Burl	ke		786 488-9847			
-	Name of	Person	Area Code Daytime	: Telephone Number		
Enclosed is a	check for the	e following amount:				
□ \$25.00 F	iling 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:

TO:

**Registration Section** 

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

REMARKABLE CONSULTING GROUP LLC		
( <u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our record nited Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liability Comp	pany were filed on 12/15/2020	and assigned
florida document number L20000390824		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	liability company here:	
N/A		
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	N/A	
Principal office address MUST BE A STREET ADDRES.	<u>s)</u>	
		202
Enter new mailing address, if applicable:	<u>N/A</u>	
Mailing address MAY BE A POST OFFICE BOX)		
		. <u> </u>
		<u> </u>
3. If amending the registered agent and/or registered of	fice address on our records, <u>enter</u>	بب the name of the new regis
gent and/or the new registered office address here:		8
Name of New Registered Agent:		<del></del>
New Registered Office Address:		
	Enter Florida street address	y .
	, Flo	orida
	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
AR	Gary J. Burke	19821 NW 2ND AVE., SUITE 404 MIAMI, FL	
			■Remove
			□Change
AR	Briana Burke	19821 NW 2ND AVE., SUITE 404 MIAMI. FL	33169 □Add
			Remove
			□Change
			□Add
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				38	
ective date, if other than the date of file	ing:		(o <sub>l</sub>	ptional)	
effective date is listed, the date must be specific a e: If the date inserted in this block does no	ind cannot be prior timeet the application.	to date of filing or able statutory fil	more than 90 days a	fter filing.) Pursuant to	605.03 listed
ument's effective date on the Department o	f State's records.		9 . oqu	and and will not be	maca
cord specifies a delayed effective date, but n s filed.	ot an effective ti	me, at 12:01 a.m	on the earlier of	(b) The 90th day:	after t
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ed	2021				
7	>	<u>.</u>			
\/. / <i>/</i>	<b>(</b> )				
7	2				
Signature of	a member or autho	rized representati	e of a member		-