120000391164

(Requestor's Name)
(Address)
(Address)
(tables),
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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2022 AUG -2 PM 1: 07

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

FILED

CLOSERS CONSULTING LLC

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

2022 AUG -2 PM 1:07

	(A Florida Limited Liability Company)	MELAHASSEF. F
The Articles of Organization for this Limited I Florida document number 1,20000391164		1, 2021 and assigned
This amendment is submitted to amend the fol		
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	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)	
B. If amending the registered agent and/or agent and/or the new registered office addr	registered office address on our records, ess here:	enter the name of the new registered
Name of New Registered Agent:	CAMERON CLAYTO	Ν
New Registered Office Address:	2225 SPRING HARBOR DRIVE, APT H	
	Enter Florida su ec	address
	DELRAY BEACH	, Florida ³³⁴⁴⁵
	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 lightlity company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Regis

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	CAMERON CLAYTON	2225 SPRING HARBOR DRIVE, APT H	= Add
		DELRAY BEACH, FL 33445	Remove
			□Change
MGR	HOLLY OLSEN	2225 SPRING HARBOR DRIVE, APT H	□Add
		DELRAY BEACH, FL 33445	BRemove
			Change
			□Add
		<u> </u>	□Remove
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(If an e <u>Note</u>	ive date, if other than the date of filing: (optional) ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date went's effective date on the Department of State's records.	Pursuant to 605 vill not be liste	.0207 (3)(b) ed as the
If the record is	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The led.	90th day after	r the
	July 25th 2022.		