L21000037461

(Re	equestor's Name)	
(Ac	idress)	
	idress)	
(^(:01055)	
(Cir	ty/State/Zip/Phone	e #)
☐ SICK-NS	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
,		,
		· · · · · · · · · · · · · · · · · · ·
(DC	ocument Number)	
Certified Copies	_ Certificates	of Status
Canada Una Assaria da	50 - O#	
Special Instructions to	Filing Officer:	
		}

Office Use Only



400437462354

10/03/24--01019--013 **61.25

11/5/24 KH

COVER LETTER

TO: Registration Sec Division of Corp	porations		
SUBJECT: Pugh	Consulting L	Led Liability Company	
V	,		
The enclosed Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspor	ndence concerning this matter to	o the following:	
	Jenniler Pa	Name of Person	
	14328 Sada	Fime Company / Rope TVai Additss	
	Talla hasse	ETL 33305 City/State and Zip Code	
For further information ed	E-mail address: (to	o be used for future annual report notific	ation)
Sentitly Name of	Perkon	at (<u>J35</u>) <u>3U8-U2 U</u> Area Code Daytime	13 Felephone Number
Enclosed is a check for the	e following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S	ection	Street Address: Registration Sect	
Division of Co P.O. Box 632	orporations 7	Division of Corporate The Centre of Ta	orations of

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Punh Consulting, LLC	
(Xame 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 Muary 31, 343 and assigned Florida document number <u>L2100003746</u>	
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 me words "bindted Liability Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registe agent and/or the new registered office address here</u> :	<u>red</u>
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street address	
, Florida	
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 will 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 Ment

JE O

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>	Type of Action
			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			Remove
			□Change
<u> </u>			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			—— Canaloge
			Change Change
			Add Signade S

		· · · · · · · · · · · · · · · · · · ·					
							<u> </u>
		·					_
	-					J	
							
					· · · · · · · · · · · · · · · · · · ·		
							
				·			
							
	-						_
	· · · · · · · · · · · · · · · · · · ·						
							_
	,						
Note: If the d	e, if other than the is listed, the date mate inserted in this fective date on the	block does not m	eet the applicable	late of filing or more e statutory filing r	(option than 90 days after fil equirements, this d	al) ing.) Pursuant to late will not be	605.0207 (3 listed as th
he record specif ord is filed.	ies a delayed effect	ive date, but not a	an effective time.	, at 12:01 a.m. on	the earlier of: (b)	The 90th day a	fter the
Dated 10/	<u> 130 ·</u>	1/2/	<u> 2024</u>			15	7074 NOV
5cu	(/il						

Filing Fee: \$25.00