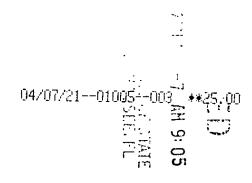
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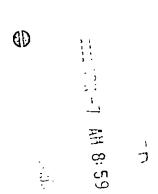
	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
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	(Business Entity Name)	
	(Document Number)	
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COVER LETTER

TO: Registration So Division of Cor			
SGA Consi	ultants LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
		_	
	Anita Durham		
	Anita Durham Name of Limited Liability Company cles of Amendment and fee(s) are submitted for filing. Direspondence concerning this matter to the following: Anita Durham Name of Person SGA Consultants LLC Firm/Company 2218 Woodlawn Drive Address Tallahassee, FL 32303 City/State and Zip Code ardurham I@comeast.net E-mail address: (to be used for future annual report notification) attion concerning this matter, please call: Name of Person at () 933.8469 Area Code Daytime Telephone Number k for the following amount: Fee S30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Address: attion Section Registration Section Division of Corporations		
	SGA Consultants LLC		
	•	Firm/Company	
	2218 Woodlawn Drive		
		Address	
	Tallahassee, FL 32303		
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
			Conton
For further information of			meanony
Anita Durham		850 933-8469	
Name o	of Person		ne Telephone Number
Enclosed is a check for the	he following amount:		
■ \$ 25.00 Filing Fee	S30.00 Filing Fee &	Certified Copy	Certificate of Status & Certified Copy
Mailing Addres			ation.
			
P.O. Box 632	=		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SGA Consultants LLC		
(<u>Name of the Limited Liability</u> (A Florida	y Company as it now appears on our record Limited Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Co	ompany were filed on2/24/2021	and assigned
This amendment is submitted to amend the following:	 '	
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		·
(Principal office address MUST BE A STREET ADDR.	ESS)	

Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>enter</u>	r the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	
	nuer r ioriaa sireet addre.	33
		lorida Zip Code
	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 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	Samuel G. Marco	2218 Woodlawn Drive	□Add
		Tallahassee, Florida 32303	■Remove
			_
			DAid
			Remove
			□Change
			□Add
		-	□Remove
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ffective date, if other than the	e date of filing: 4/7/2021 ust be specific and cannot be prior to date	(optional) te of filing or more than 90 days after filing.) Pursuant to 60	5.0207
iote: If the date inserted in this locument's effective date on the	lock does not meet the applicable	statutory filing requirements, this date will not be lis	ted as t
record specifies a delayed effect l is filed.	ve date, but not an effective time, a	at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
ated April 7	2021		
		representative of a member	
(No est)	L. S. HUAK SAM.		

Typed or printed name of signee