

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DUTTE COONCILETING LLC

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Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PUZZLESCONSULTING LLC

(Name 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 Florida document number <u>L21000093236</u>	were filed on <u>03/04/21</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abbr	eviation "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 a agent and/or the new registered office address here:	ddress on our records, enter the name	of the new registered
Name of New Registered Agent:	and the second s	
New Registered Office Address:	Enter Florida street address	
	, Florida 🗓	22
	, Florida	Zip Code
$\underline{New\ Registered\ Agent's\ Signature,\ if\ changing\ Registered\ Agent:}$		5
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pheing filed to merely reflect a change in the registered office company has been notified in writing of this change.	perjointance of my daties, and rampa provided for in Chapter 605, F.S. Or. if	this document is

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

Title	<u>Name</u>	Address	Type of Action
AMBR	Karen Rosales	7901 4TH ST NORTHSTE 300	□Add
		ST PETERSBURG, FL 33702	XIRemove
			🗆 Change
			□Add
			□Remove
			□ Change
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			□Remove
			□Change

is ancioning any other into matter	on, enter change(s) here: (Attach additional sheets, if necessary.)	
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Effective date, if other than the dat (If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	e specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to k does not meet the applicable statutory filing requirements, this date will not be	605.0207 (3 listed as th
the record specifies a delayed effective deord is filed.	late, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a	after the
Dated February 24	2022	
	gnature of a member or authorized representative of a member	
Sig	gnature of a member or authorized representative of a member	•
Morgan Noble	2	

Filing Fee: \$25.00