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## **COVER LETTER**

TO: Registration Se Division of Cor				
Hawkins Co	onsultling, LLC			•
SUBJECT:	Name of Lim	ited Liability Company	····	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Stacie Hawkins			
		Name of Person		~1
	Hawkins Consulting, LLC			2021 JUH -4 S CAREED
		Firm/Company		<b>=</b>
	3306 Pasadena Court			70
	-	Address		
	Fort Myers FL 33905			PH 3: 09
		City/State and Zip Code		- [1:1]
	staciehawkins@outlook.cor			
For further information o	E-mail address: ( oncerning this matter, please of	to be used for future annual report no	tification)	
	oncerning this matter, please co			
Stacie Hawkins		623 2292942 at ( )		
Name o	f Person	Area Code Daytir	ne Telephone Number	г
Enclosed is a check for the	ne following amount:			
<b>≘</b> \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &
Mailing Addres		Street Address:	action	
Registration S Division of C		Registration So Division of Co		
P.O. Box 632		The Centre of	•	
Tallahassee, l	FL 32314	2415 N. Monro	oe Street, Suite 8	10

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited I	<u>.iability Compa</u> Florida Limited I	ny as it now appears on our r liability Company)	ecords.)	
The Articles of Organization for this Limited Liabi	lity Company	were filed on $\frac{3/16/21}{}$		_ and assigned
Florida document number L21000123187	·			
This amendment is submitted to amend the followi	ng:			
A. If amending name, enter the new name of th	<u>e limited liab</u>	ility company here:		
Dynamic Nursing Consultants, LLC				
The new name must be distinguishable and contain the words	s "Limited Liabi	lity Company," the designation	"LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		3306 Pasadena Court		2
		Fort Myers, Fl 33905	<u>.</u>	22
			-	
			_ <del></del>	4 5
Enter new mailing address, if applicable:		3306 Pasadena Court	, , ,	D 1 . 3
Mailing address MAY BE A POST OFFICE BO	X)	Fort Myers, Fl 33905	(Non	<u>ښ</u> ښ
	<u></u>			0.9
3. If amending the registered agent and/or registered and/or the new registered office address have a Name of New Registered Agent:		address on our records, <u>e</u>	enter the name o	f the new regi
	MAC Downstr	C		
New Registered Office Address:	3306 Pasadena	Enter Florida street a	address	
I	ort Myers		Florida <u>33905</u>	
-		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>	Name	Address	Type of Action
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			□Remove
			☐ Change
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ective date, if other than the effective date is listed, the date must be: If the date inserted in this blo	<b>date of filin</b> be specific an ock does not:	ig: d cannot be pri	or to date of fil	ing or more than 90	(optional) ) days after filing, ments, this date	) Pursuai will not	nt to 605,02 t be listed
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cord specifies a delayed effective s filed.	e date, but no	t an effective	time, at 12:0	i a.m. on the ear	mer of: (b) Th	e 90th (	lay after th
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