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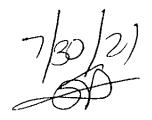
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## **COVER LETTER**

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Div	ision of Cor	porations		
	Wes Consu	lting, LLC		
SUBJECT	Name of Limited Liability Company			
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
		ndence concerning this matter		
		Jorge H Fernandez		
			Name of Person	
			Firm/Company	<del></del>
		10320 SW 125 Street		
		· · · · · · · · · · · · · · · · · · ·	Address	
		Miami, Florida 33176		
		fernandez.jorge@icloud.cor	City/State and Zip Code n	
		E-mail address: (	to be used for future annual report noti	fication)
For further in	iformation c	oncerning this matter, please co	all:	
Jorge H Feri	nandez		at () 297-6958 Area Code Daytim	
<del></del>	Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a	i check for th	ne following amount:		
■ \$25.00 H	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	iling Addres gistration 5		<u>Street Address:</u> Registration Se	
Div	vision of C	orporations	Division of Cor	rporations

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Wes Consulting, LLC	
(Name of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
he Articles of Organization for this Limited Liability Company were filed on $\frac{\mathrm{July}}{\mathrm{Interpolate}}$	: 06, 2021 and assigned
orida document number 1.21000307772	
nis amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability company he	<u>re</u> :
ne new name must be distinguishable and contain the words "Limited Liability Company," the de	signation "L.L.C" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	<u> </u>
Principal office address MUST BE A STREET ADDRESS)	
	7 17
nter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	v, *
If amending the registered agent and/or registered office address on our regent and/or the new registered office address here:  Name of New Registered Agent:	ecords, <u>enter the name of the new regi</u>
New Registered Office Address:  Enter Flor	ida strect 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 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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Christian Hutson	Christian Hutson	■Add
		12200 SW 70 Court	□Remove
		Miami, FL 33156	□Change
MGR	Alvaro Aguado	Alvaro Aguado	• Add
		2473 NE 4th Street	
	-	Homestead, FL 33033	_
			□Change
			□Add
			□Remove
			□Change
			DAdd
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			□Remove
			□ Change

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ective date, if other than th	July 05, 2021	(optional)
atherise date is listed the date m	ist be specific and cannot be prior to date of filing or more tha clock does not meet the applicable statutory filing requ	m 90 days after filing.) Pursuant to 605,020
ument's effective date on the	Department of State's records.	
	ve date, but not an effective time, at 12:01 a.m. on the	earlier of: (b) The 90th day after the
s filed.		,
July 08	. 2021	
ed		• • •
	Signature of a member or authorized representative of a m	, 
<del></del>	Signature of a member or authorized representative of a m	nember

Filing Fee: \$25.00