

L21000405716

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

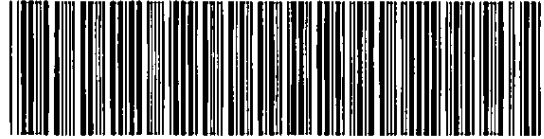
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2021-11-2 PM 2:13



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 5, 2021

DRUCILLA GRAHAM
613 NW 3RD AVE
APT 615
FT. LAUDERDALE, FL 33311

SUBJECT: D'COL CONSULTING PARTNERS LLC *** (SEE NOTE)***
Ref. Number: L21000405716

We have received your document for D'COL CONSULTING PARTNERS LLC *** (SEE NOTE)*** and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your document is being returned as requested.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers
Regulatory Specialist II

Letter Number: 921A00027015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D'COL CONSULTING PARTNERS LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DRUCILLA GRAHAM
Name of Person
D'COL CONSULTING PARTNERS LLC
Firm/Company
613 nw 3rd ave apt 615
Address
FORT LAUDERDALE FL 33311
City/State and Zip Code
dcolconsulting@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DRUCILLA GRAHAM 305 8908721
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
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**

D'COL CONSULTING PARTNERS 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 were filed on 9/13/2021 and assigned
Florida document number L21000405716

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 the words "Limited 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)

613 NW 3rd ave Apt 615

FORT LAUDERDALE FL 33311

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

151 N NOB HILL ROAD

#394

PLANTATION FL 33324

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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 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>	<u>Type of Action</u>
AMBR	DRUCILLA GRAHAM	613 NW 3rd Ave apt 615	<input type="checkbox"/> Add
		fort lauderdale fl 33311	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	VIJAY DACOSTA	5611 cleveland street	<input type="checkbox"/> Add
		Hollywood FL 33021	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	EVANS COLIN	4300 NW 191st Ter, Miami Gardens, FL 33055	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	KELITA SHARPE	1031 sw 29th way Fort Lauderdale FL 33312	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

10/25/2021 _____

DRUCILLA GRAHAM

Typed or printed name of signee