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(Address)	
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COVER LETTER

Division of Cor	porations		•
3 4 1 45 4 55 AVE	sulting Firm		
SUBJEC1:	Name of Limi	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:	
	Tabitha Postell		
		Name of Person	
	P & R Consulting Firm		
		Firm/Company	
	2514 7th Ave East		
		Address	
	Bradenton, Fl 34208		
		City/State and Zip Code	
	tpostell14@gmail.com E-mail address: (1	to be used for future annual report notifi	ication)
For further information c	oncerning this matter, please ca		
Tabitha Postell		941 7990558 at ()	
Name o	f Person		Telephone Number
Enclosed is a check for the	ne following amount:		
□ S25.00 Filing Fec	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Registration Section

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

P & R Consulting Firm LLC 21 007 12 Pit 3: 19

(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 September 20, 2021 and assigned Florida document number $\underline{L21000413959}$ 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) 401 East Jackson St Suite 2340 Enter new mailing address, if applicable: Tampa, Fl 33602 (Mailing address MAY BE A POST OFFICE BOX) 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: 401 East Jackson St Suite 2340 New Registered Office Address: Enter Florida street address _, Florida 33602 Zip Code Tampa

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:

<u>or removed</u>	from our records:		
MGR = M $AMBR = A$	lanager uthorized Member	Address 21 OCT 12 PH	
<u>Title</u>	<u>Name</u>	Address 21 OCT 12 PH	3: 19 Type of Action
AMBR	Tabitha Postell	401 East Jackson St Suite 2340	≡ Add
		Tampa, Fl 33602	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove

D. If am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary,)
	21 OCT 12 PH 3: 19
	
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E. Effec	ctive date, if other than the date of filing: (optional) ffective 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)
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
	ment's effective date on the Department of State's records.
If the reco	ord 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.
Dated	d October 7 2021
مسد	(My 22 mg)
	Signature of a member or authorized representative of a member

Typed or printed name of signee