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COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

	truction Consulting LLC		
	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Susan Selles, Esq.		
		Name of Person	
	C&S Construction Consul	ting LLC	
		Firm/Company	
	2371 NW 33rd Street, Suit	e 707	
		Address	··· <u>·</u>
	Oakland Park, FL 33309		
		City/State and Zip Code	
	attysusanselles@gmail.com		
		to be used for future annual report not	ification)
For further information c	concerning this matter, please c	all:	
Susan Selles		561 255-0798 at ()	
Name o	rt Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 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)
Mailing Address		Street Address:	
Registration 9 Division of C		Registration Se Division of Co	
P.O. Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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on Consulting LLC

(Name of the Limited Liability Company as it now appears on our records.) IALLAHASSEE, FI C&S Construction Consulting LLC The Articles of Organization for this Limited Liability Company were filed on $\frac{11/17/21}{1}$ and assigned Florida document number <u>L21000494821</u> 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 "L.L.C." or the abbreviation "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 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

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>	Address	Type of Action
AMBR	Susan Selles	2371 NW 33rd Street, 707	
		Oakland Park, FL 33309	
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			□Change

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Signature of a member or authorized representative of a member	_	111.11.11.11	//			

Filing Fee: \$25.00