## 122000301440

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
tified Copies Certificates of Status
pecial Instructions to Filing Officer:

Office Use Only



100393698051

09/98/22--01008--003 \*\*30.00

SEGRETARY OF STATE TALLAHASSEE, FL

2022 SEP -8 PH 4: 20

## Registration Section Division of Corporations

.T:	Name of Lim	ited Liability Company	
osed Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
turn all correspo	ndence concerning this matter	to the following:	
	Kyle McCullers		
		Name of Person	
		Firm/Company	
	11808 Holly Creck Dr		
	Riverview, FL 33569	Address	
	TWEIVEW, 112 3.3309	City/State and Zip Code	
	kyle@road2freeinvest.com E-mail address: (	to be used for future annual report not	ification)
er information co	oncerning this matter, please ca	all:	
:Cullers		813 997-8290 at ()	ne Telephone Number
Name of	Person	Area Code Daytin	ne Telephone Number
d is a check for th	e following amount:		
.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 Registration S		<u>Street Address:</u> Registration Se	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## TO ARTICLES OF ORGANIZATION OF

cles of Organization for this Limited Liability Company were filed on 07/06/2022 and assigned document number L22000301440 endment is submitted to amend the following:  nending name, enter the new name of the limited liability company here:  Consulting LLC Bronze Arvil LLC and the distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" ere principal offices address, if applicable:  al office address MUST BE A STREET ADDRESS)  ew mailing address, if applicable:  and assigned of the new name of the limited liability company here:  and assigned of the new registered and the new registered Liability Company, "the designation "LLC" or the abbreviation "LLC" ere principal office address MUST BE A STREET ADDRESS)  ew mailing address, if applicable:  and assigned of the new registered and the source of the new registered office address on our records, enter the name of the new registered address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida arreet address	Cash Flow Bag LLC	-
document number 1.2200301440  endiment is submitted to amend the following:  mending name, enter the new name of the limited liability company here:  Consulting LEC Bronze Arwil LLC (1.00)  name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" or the abbre	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
document number 1.22000301440  mending name, enter the new name of the limited liability company here:  Consulting LLC Bronze Arwin LLC  mane must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" or the abbrev	icles of Organization for this Limited Liability Company were filed on 07/06/2022	and assigned
mending name, enter the new name of the limited liability company here:    Consulting LLC   Bron 2		
mending name, enter the new name of the limited liability company here:    Consulting LLC	document number 1,220(0,501440)	
Consoliting LLC Bronze Arwil LLC and name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" new principal offices address, if applicable:  pal office address MUST BE A STREET ADDRESS)  mew mailing address, if applicable:  page address MAY BE A POST OFFICE BOX)  mending the registered agent and/or registered office address on our records, enter the name of the new Tegistered office address here:    Name of New Registered Agent:   Signature   Sign	endment is submitted to amend the following:	
mem must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" new principal offices address, if applicable:  **pal office address MUST BE A STREET ADDRESS**  **mem mailing address, if applicable:  **mem must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" or the	nending name, enter the new name of the limited liability company here:	
name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  new principal offices address, if applicable:  ipal office address MUST BE A STREET ADDRESS)  new mailing address, if applicable:  ing address MAY BE A POST OFFICE BOX)  amending the registered agent and/or registered office address on our records, enter the name of the new legistand/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida		
new principal offices address, if applicable:  pal office address MUST BE A STREET ADDRESS)  new mailing address, if applicable:  In address MAY BE A POST OFFICE BOX)  Imending the registered agent and/or registered office address on our records, enter the name of the new Tegistered address here:    Name of New Registered Agent:	name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
new mailing address, if applicable:  In address MAY BE A POST OFFICE BOX)  Intending the registered agent and/or registered office address on our records, enter the name of the new legistered office address here:    Name of New Registered Agent:   Column   Column		
new mailing address, if applicable:  Ing address MAY BE A POST OFFICE BOX)  Inmending the registered agent and/or registered office address on our records, enter the name of the new registered office address here:    Name of New Registered Agent:	•	
mending the registered agent and/or registered office address on our records, enter the name of the new registered address here:    Name of New Registered Agent:	pal office address MUST BE A STREET ADDRESS)	
mending the registered agent and/or registered office address on our records, enter the name of the new registered office address here:    Name of New Registered Agent:		
mending the registered agent and/or registered office address on our records, enter the name of the new registered office address here:    Name of New Registered Agent:		
mending the registered agent and/or registered office address on our records, enter the name of the new registered office address here:    Name of New Registered Agent:	new mailing address, if applicable:	
Mame of New Registered Agent:  New Registered Office Address:    Mame of New Registered Office Address		
Name of New Registered Agent:   Enter Florida street address	g dudiess 117/1 DE AT OUT OF FIOLE WORL	
Mame of New Registered Agent:   Mew Registered Office Address:   Enter Florida street address   Zip Code		20 S1
Name of New Registered Agent:  New Registered Office Address:    New Registered Office Address:	the registered egent and/or registered office address on our records, enter the na	me of the new Tegis
Name of New Registered Agent:  New Registered Office Address:    Enter Florida street address   Florida	nd/or the new registered office address here:	[== 1 + 1
Name of New Registered Agent:  New Registered Office Address:    Enter Florida street address   Florida		五兰
New Registered Office Address:    Enter Florida street address		55 🔨
New Registered Office Address:    Enter Florida street address   Florida	Name of New Registered Agent:	
Enter Florida street address , Florida  City  Zip Code  egistered Agent's Signature, if changing Registered Agent:	New Registered Office Address:	''
Cuy Zip Code egistered Agent's Signature, if changing Registered Agent:	Enter Florida street address	<u>2</u> 0 ΛτΕ
egistered Agent's Signature, if changing Registered Agent:	Florida ,	
	Cuy	Zip Code
	spistered Agent's Signature, if changing Registered Agent:	
		aaree ta camply wi
	ions of all statutes relative to the proper and complete performance of my dutics, and I at the obligations of my position as registered agent as provided for in Chapter 605, F.S. C	)r_if this document

g filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

pany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

R = Ma $R = Au$	mager ithorized Member		
	Name	<del></del>	Type of Action
12	ryle m((uller)	2212 15th AVE E	DAdd
	J	Palmetto, FL 34221	Remove
			□Change
12	Evergreen Defense Trust	Tampa, FL 33402	)_ DEXIGO
		Tampa, FL 33402	□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change

noved from our records:

111114114114114114114114114114114114114114114114				<del></del>
				<del></del>
				_
· · · · · · · · · · · · · · · · · · ·				
			_ <del>_</del>	
				<del></del>
	······································			
			<u>.                                    </u>	
			•	
ive date lif other than the da	te of filing:		(opti	ional)
ive date, if other than the da fective date is listed, the date must be If the date inserted in this block tent's effective date on the Depa	t does not meet the ap	pheable stautory i	or more than 90 days afte filing requirements, th	r filing.) Pursuant to 605.0207 is date will not be listed as
d specifies a delayed effective d led.	ate, but not an effectiv	ve time, at 12:01 a	.m. on the earlier of: (	o) The 90th day after the
September 5th	2022	·		
September 3111	——————————————————————————————————————	<del></del>		
Deplemon 3111	10/1//			
	10//		<i>C</i> . 1	
	gnapire of a member or :	inthorized represent	ative of a member	