L22000378444

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e1115 112 Z	C 1523	TTG CO	NSULTING LLC		•
SUBJEC	t1: <u> </u>		Name of Lim	ited Liability Company	
The encl	losed /	Articles of .	Amendment and fee(s) are sub	mitted for tiling.	
Please re	eturn a	ll correspo	ndence concerning this matter	to the following:	
			JALESSA BAIN		
				Name of Person	
			TTG CONSUL	TING LLC	
				Firm/Company	
790) 4TH STREET #300			2024 JAN 22 SECRETY		
				Address	
			ST. PETERSBUI	RG, FLORIDA 33702	•
			<u></u>	City/State and Zip Code	fication)
			Jalessa.Bain@gn	nail.com	" (D
			E-mail address: (to be used for future annual report noti-	fication)
For furth	aer info	ormation co	oncerning this matter, please e	all:	
JALE	SSA I	BAIN		at (<u>305</u>) <u>413-0024</u>	
		Name of	Person	Area Code Daytim	e Telephone Number
Enclosed	d is a c	heck for th	e following amount:		
Z \$25.	.00 Fil	ing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		ng Addres stration S		<u>Street Address:</u> Registration Sec	ction
Registration Section Division of Corporations		Division of Cor			
	P.O.	Box 632	7	The Centre of T	
	Talla	ihassee. F	FL 32314	2415 N. Monro	e Street. Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TTG CONSULTING LLC

Number Cale District of Find State Control		
(A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Compan	y were filed on 8/29/2022 8AM	and assigned
Florida document number <u>L22000378444</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the	abbreviation "L.1C."
Enter new principal offices address, if applicable:		200
(Principal office address MUST BE A STREET ADDRESS)		
		P-)
		2
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the na</u>	ame of the new registered
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	e performance of my duties, and I at provided for in Chapter 605, F.S. C	m familiar with and Fr. if this document is

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
MGR	JEAN BAPTISTE STEINER	1995 IVY BRANCH LAN	
		LOGANVILLE, GA	
		30052	□Remove
			□Change
			Change
			□Add
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			20 20 20 21 21 21 21 21 21 21 21 21 21 21 21 21
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-	, 	<u></u>	
ffective date, if other than the date of filing:	(optional)	A. S
an effective date is listed, the date must be specific and cannot be prior to do ote: If the date inserted in this block does not meet the applicable	ate of thing or more than 90 days after thing statutory filing requirements, this dat	g.) Pursuant 10 605.) e will not be liste	ed as
ocument's effective date on the Department of State's records.			
	at 12:01 a.m. on the earlier of: (b) T	he 90th day after	the
record specifies a delayed effective date, but not an effective time.			
Lis filed.			
ated 1 10 2 4			
ated	ed representative of a member		