

L22 000 413 286

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

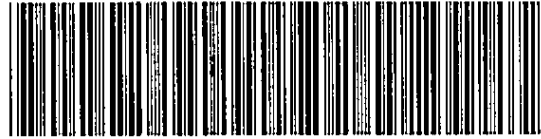
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10/14/22--01027--004 **30.00

22 OCT 14 AM 5:10

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LNR Management Consultant 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:

Lascelles Reece Jr.

Name of Person

LNR Management Consultant LLC

Firm/Company

10930 Clubhouse Rd.

Address

Pembroke Pines, FL 33026

City/State and Zip Code

Lascellesreece@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lascelles Reece

Name of Person

at (305) 632-1227

Area Code

Daytime Telephone Number

Enclosed is a check for the 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:

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

22 OCT 14 AM 5:10

RECEIVED
DIVISION OF CORPORATIONS

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

LNR Management Consultant 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 9-21-2022 and assigned Florida document number L22000413285

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)

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:

Lascelles Reece Jr.

New Registered Office Address:

3350 SW 148th Avenue Suite 110

Enter Florida street address

Miramar

City

, Florida

33027

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.

Lascelles Reece Jr.

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>
MGR	Lascelles Reece	3350 SW 148 th Avenue	<input type="checkbox"/> Add
		Suite 110	<input checked="" type="checkbox"/> Remove
		Miramar, Fl 33027	<input type="checkbox"/> Change
MGR	Lascelles Reece Jr.	3350 SW 148 th Avenue	<input checked="" type="checkbox"/> Add
		Suite 110	<input type="checkbox"/> Remove
		Miramar, Fl 33027	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

My Changes are to add the suffix "Jr"
to my name as Registered Agent and MGR from
Lascelles Reece to Lascelles Reece Jr.

22 OCT 14 AM 5:10

DEPT OF CORRECTIONS

E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated 10-6, 2022

Lascelles Reece

Signature of a member or authorized representative of a member

Lascelles Reece

Typed or printed name of signee