Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000098455 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HALLAMEYERCONSULTING LLC

Certificate of Status	0
Certified Copy	1
Page Count	07
Estimated Charge	\$55.00

Electronic Filing Menu Corporate Filing Menu

Help

1/1

COVER LETTER

TO:	Registration Se Division of Cor					
erro n						
SUBJECT: Name of Limited Liability Company						
The en	closed Articles of	Amendment and fee(s) are sub-	uitted for filing			
Please	return all correspo	ondence concerning this matter t	to the following:			
		Cheyenne Moseley				
			Name of Person	The second of th		
		Legalzoom com, Inc.				
			Firm Company			
		101 N Brand Blvd 11th Fl				
			Address			
		Glendale, CA 91203				
			City/State and Zip Code			
		hallameyerconsulting@gma				
		E-mul address (0	o be used for future annual report not	fication)		
For for	ther information c	oncerning this matter, please ca	Ш			
Cheyenne Moseley		800 773-6888 at ()				
Name of Person		Area Code Daytin	te Telephone Number			
Enclos	ed is a check for t	he following amount:				
		□ \$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 (senclosed)		
	Registr Divisio P.O. B	ING ADDRESS: ation Section on of Corporations os 6327 assec, FL 32314	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C	on ranons		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HALLAMEYERCONSULTING LLC	
(Name of the Limited Liability C (A Florida Li	Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Con Florida document number 1.22000435071	apany were filed on 10/10/2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	I liability company here:
Hallameyer Consulting LLC	
The new name must be distinguishable and comain the words "Limited	Lability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRES	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAYBE A POST OFFICE BOX)	
B. If amending the registered agent and/or register registered agent and/or the new registered office addres	red office address on our records, enter the name of the no
Name of New Registered Agent:	25
New Registered Office Address:	
	Enter Florida street address
	Florida - On - AB Co.k
	6

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

To:

<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Remove
		···· ·	☐ Change
			
			☐ Remove
			Change
			
			☐ Remove
			Change
			□ Remove
			Change
			☐ Remove
			☐ Change
			□ Add
			Remove
			□ Change

To:

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00