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COVER LETTER

TO:

SUBJECT: Edgewood Community Consulting LC Name of Limited Liability Company	<u>.</u>
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
George E. Montgomery Jr	
Firm/Company	
434 W. Georgia St	
Address	
City/State and Zip Code George @ debt 5 over engaty . (8) E-mail address: (to be used for future annual report notification)	<u>—</u>
Course and Elphone	7022
E-mail address: (to be used for future annual report notification)	2.001
For further information concerning this matter, please call:	2
George EMontgomery Jc at (617) 669 - 2390 Name of Person Area Code Daytime Telephone No.	1/2
Enclosed js a check for the following amount:	· i —
Certificate of Status S55.00 Filing Fee & S60.	00 Filing Fee, tificate of Status & tified Copy titional copy is enclosed)
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, St.	nite S10

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Edge wood Community Consultiung 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	and assigned
Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
Edgewood Community Consulting The new name must be distinguishable and contain the words "Limited Liability Company," the designation	LLC
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)	
	Tr)
Enter new mailing address, if applicable:	
-	. 10
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, agent and/or the new registered office address here:	enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street	address
	, Florida

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
			□Add
			□Remove
			□Change
			
			□Remove
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,	<u> </u>		□Remove
			□Change

If amending at	y other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
-	
(If an effective dat Note: If the da	e, if other than the date of filing:
ne record specifiord is filed.	ies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	1 - eery Martan Signature of amember of authorized representative of a member Crevise EMUNTSOMERY J Typed or printed name of signee
	George EMontgonery J

Filing Fee: \$25.00