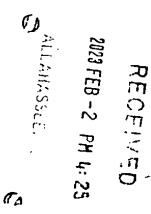
## L23000047399

(Re	equestor's Name)
(Āc	ddress)
(Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	J. HORNE FEB - 3 2023
	Office Use Only



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## **Advanced Incorporating Service**

1317 California Street P.O. Box 20396 Tallahassee, FL 32316 

Clothier Executive Consulting, all
FOR OFFICE USE ONLY
PICK ONE:CERTIFIED COPYPHOTOCOPYC.U.S.
FILING:CORPORATIONLLCLIMITED PARTNERSHIPGENERAL PARTNERSHIP
RETRIEVAL:GOOD STANDING CERT/C.U.SCERTIFIED COPYPHOTOCOPY Of
APOSTILLE/NOTARY CERTIFICATION REQUEST:
Country Amount of Documents
DATE 2/2/23 TIME

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

ARTICLES OF C	AMENDMENT O DRGANIZATION OF		
CLOTHIER EXECUTIVE CONSULTING, LLC	·		
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L23000047399	were filed on 01/31/2023 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liah	ility company here:		
<u> </u>			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	260 1st Ave. S		
(Principal office address MUST BE A STREET ADDRESS)	#2(X)-130		
	St. Petersburg, FL 33701		
Enter new mailing address, if applicable:	260 1st Ave. S		
(Mailing address MAY BE A POST OFFICE BOX)	#200-130		
	St. Petersburg, FL 33701		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	iddress on our records, enter the name of the new registered		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida City Zip Code		
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is		

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

## MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Kent Clothier	260 1st Ave. S	□Add
		#200-130	□Remove
		St. Petersburg, FL 33701	=0
			□Add
			☐Remove
			□Change
			Remove
			☐ Change
	<del></del>		□ Add
			□Remove
			Change
			□Add
			Remove
			□Change
	<del></del>	<del></del>	□Add
			Remove
			Change

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	· <del>-</del>		-	
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		<u>.</u>	<u> </u>	
			<u></u>	
ective date, if other than the confective date is listed, the date must te: If the date inserted in this bloomment's effective date on the Department.	ck does not meet the appli	cable statutory filing	(option re than 90 days after fit requirements, this d	al) ing.) Pursuant to 605,020 ate will not be listed as
cord specifies a delayed effective s filed.	date, but not an effective	time, at 12:01 a.m. o	n the earlier of: (b)	The 90th day after the
	2023			
February 2		·		
ed February 2 s/: Kent Clothier	Signature of a member or autl	·		

Filing Fee: \$25.00