6/8/23, 10:42 AM Division of Corporations

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> > (((H23000207332 3)))



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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:		
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PEBBLES TO BOULDERS CONSULTING GROUP LLC

Certificate of Status	0
Certified Copy	1
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Help S. ROBERTS

JUN - 8 2023

From: Richard York

COVER LETTER

10: Registration S Division of Co		•	e.
PEBBLE SUBJECT:	S TO BOULDERS CONSULTI	NG GROUP LLC	
3000ECT:	Name of Lim.	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
	Cheyenne Moseley		
		Name of Person	
	Legalzoom.com, inc.		
		Firm/Company	
	101 N Brand Blvd 11th Fl		
		Address	
	Glendale, CA 91203		
	stevewolfe59@yahoo.com	City/State and Zip Code	
	- -	be used for future annual report noti-	fication)
For further information	concerning this matter, please ca	11:	
Cheyenne Moseley		800 773-0888	
Name	of Person	at () Area Code Daytime	e 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

From: Richard York

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PEBBLES TO BOULDERS CONSULTING GROU	PLLC	
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our recor Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Company	were filed on 02/27/2023	and assigned
Florida document number L23000104884		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	olity company here:	
The new name must be distinguishable and contain the words "Limited Liabi	hty Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	17200 Balance Cove	023
(Principal office address MUST BE A STREET ADDRESS)	Land O Lakes, FL 34638	
		ري
Enter new mailing address, if applicable:	17200 Balance Cove	ي
(Mailing address MAY BE A POST OFFICE BOX)	Land O Lakes, FL 34638	5 (0)
B. If amending the registered agent and/or registered o	ffice address on our record	ds, enter the name of th
registered agent and/or the new registered office address her Name of New Registered Agent:	<u>e</u> :	
New Registered Office Address:		
New Registered Office Address.	Enter Floridastreet addre	31
	. F I	lorida
	Ciņ	lorida ZipCode
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr		

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

From: Richard York

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
AMBR	Steven Wolfe		5
			O Add
			□ Remove
		17200 Balance Cove, Land O Lakes, FL 34638	
			□ Remove
			Change
			□ Remove
			□ Change
			Add
			□ Remove
			🗖 Change
			🗆 Add
			□ Remove
			Change
			□ Add
			Remove
			Change

ii ifan	iending any other informa	tion, enter change(s) here: (Attach a	LegalZoom.com, Inc.	
D. 11 411	ichding any other unorma	don, enter change(s) here. (Anden to	aumonai snevis, ij necessary.j	
		<u></u> _		_
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	<u> </u>			
				
				
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	<u> </u>			
	-			
F. Effec	tive date, if other than the	date of filing:	(optional)	
(Hua e	Nective date is listed, the date must	he specific and cannot be prior to date of filing	or more than 90 days after filling.) Pursuam to	605.0207 (3)(b)
	nent's effective date on the De		filing requirements, this date will not be	usied as the
			ve time, at 12:01 a.m. on the ea	rlier of:
וחו נס)	e 90th day after the reco	ora is filea.		
Dated	Jun	E 1 2023		
Datel	1000			
		Signature of a member or authorized present		

Page 3 of 3

Typed or printed name of signee

Steven Wulfe

Filing Fee: \$25.00