## L23000294633

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## **COVER LETTER**

	legistration Sec Division of Corp			•	
SUBJECT	Meraki Busi r	ness Consulting Group LLC			
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Name of Lim	ited Liability Company	<del></del>	
The enclos	sed Articles of A	amendment and fee(s) are sub	omitted for filing.		
Please retu	ırn all correspon	dence concerning this matter	to the following:		
		Kelsey			
			Name of Person		
		ZenBusiness Inc			
			Firm/Company		
		5511 Parkerest Dr., STE 1	03		
			Address		
		Austin, TX 78731			
			City/State and Zip Code		
		fulfillment@zenbusiness.co			
		E-mail address: (	to be used for future annual report notifi-	ration) S 20	
For further	r information co	ncerning this matter, please co	all:	2023 SEP SECRETA TALLAI	_
Kelsey c/c	ZenBusiness II	nc	844 493-6249 at ( )	7.0	; =
	Name of	Person	Area Code Daytime	Telephone Number	
Enclosed is	s a check for the	e following amount:			
■ \$25,00	) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Ŋ	lailing Address:	:	Street Address:		

TO:

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Meraki Business Consulting Group 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 06/19/2023 and assigned Florida document number 1.23000294633 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 "LLC." 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 registere agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

## 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, <u>enter the title, name, and address of each person</u> <u>being addedor removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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		University Park, FL 34201	<b>=</b> Remove
			□Change
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ective date, if other than the effective date is listed, the date mu	e date of filing:		(optional)	
effective date is listed, the date mute:  If the date inserted in this b	st be specific and cannot be prio lock does not meet the appli-	r to date of filing or mo cable statutory filing	re than 90 days after filing. requirements, this date	) Pursuant to 605.0 will not be listed
ument's effective date on the D	epartment of State's records	S	,	
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cord specifies a delayed effectiv s filed.	e date, but not an effective t	inie, at 12.01 a.m. oi	i the earlier of: (b) The	e 90m day aner i
Ammer 24	2022			
ed August 24		·		
/s/ Marilyn Garma	n			
/s/ Marilyn Garma	N Signature of a member or auth	orized representative of	f a member	<del></del>