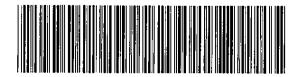
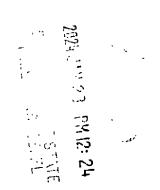


(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of	Status
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MC Carthy Cong	Sulting Group, LLC nited Liability Company
The enclosed Articles of Amendment and fee(s) are sub	omitted for filing.
Please return all correspondence concerning this matter	to the following:
Albert I	Name of Person
	Firm/Company
5271 EII	ery Ter. Address
West Pal	M Beach Florida 33417 City/State and Zip Code
dorethaph E-mail address:	(to be used for filture annual report notification)
For further information concerning this matter, please c	
Doretha Phillips Name of Person	at (56) 727-8787 Area Code Daytime 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 & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
a to the obat	THE CERTE OF FUILIBRIANCE

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MCCarhy Con St Name of the Limited Liability (A Florida	y Company as it now appears on our Limited Liability Company)	LLC records.)
The Articles of Organization for this Limited Liability Co Florida document number <u>L 2300044609</u>	ompany were filed on $\frac{9}{2}$	6 2023 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit MC Carthy Master Solution. The new name must be distinguishable and contain the words "Limit new name must be distinguishable and contain the words "Limit new name must be distinguishable and contain the words "Limit new name must be distinguishable and contain the words "Limit new name of the limit new name new name of the limit new name of the limit new name new n	ons. LLC	ı "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDR	PESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address 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 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

2

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
			□Add
	•		□Remove
			☐ Change
	····		□ Add
			□Remove
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			DRemove
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			☐ Add
			Change

If amending any other information, enter change(s) here: (Attach additional sheets,	
	
	
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ffective date, if other than the date of filing:	(optional)
f an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day. Note: If the date inserted in this block does not meet the applicable statutory filing requirement locument's effective date on the Department of State's records.	ys after filing.) Pursuant to 605.020 its, this date will not be listed as
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier d is filed.	of: (b) The 90th day after the
1	- Pa
1/19 2021	Harris State
Pated	•
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AM	•
Am	· ·
Signature of a member or authorized representative of a member	
Am	

Filing Fee: \$25.00