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Office Use Only



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## **COVER LETTER**

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Consulting LLC		
Name of Lin	nited Liability Company	<del></del>
. wate vi and	med Blavini, Company	
f Amendment and fee(s) are sub	omitted for filing.	
ondence concerning this matter	to the following:	
C. Westin Wenner C.	WESTON WENNER	
	Name of Person	
	Firm/Company	
1675 REDSTONE CENT	ER DR SUITE 150-23	
	Address	·
PARK CITY, UT 84098		
	City/State and Zip Code	<del></del>
State Senier Chancocks	COLCON WENNER CONSULTI	NGLIC @ GHASL. COM
E-mail address: (	to be used for future annual report no	tification)
concerning this matter, please o	all:	
·	419 249-7900 at ( )	
of Person	Area Code Daytir	ne Telephone Number
the following amount:		
☐ \$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)
<u>ss:</u>	Street Address:	
	Registration Se	
•		•
		oe Street, Suite 810
	PARK CITY, UT 84098  E-mail address: 6  concerning this matter  PARK CITY DESCRIPTIONS  E-mail address: 6  concerning this matter, please of Person  the following amount:  S30.00 Filing Fee & Certificate of Status	Name of Limited Liability Company

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Wenner Consulting LLC

(Name of the Limited Liability Compar (A Florida Limited L	iy as it now appears on o iability Company)	our records.)	<del></del>
The Articles of Organization for this Limited Liability Company Florida document number 1.24000025794	were filed on 01/11/20	024 an	d assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
Wenner Services LLC			
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designa	ation "LLC" or the abbreviation	on "L.L.C."
Enter new principal offices address, if applicable:			A st
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>	1024
			AP 11
		ابت حل رئيستان رئيستان	<del></del>
Enter new mailing address, if applicable:		N.S.S.	
(Mailing address MAY BE A POST OFFICE BOX)		<u>ന്</u> ന് വ	<b>=</b> 0
	<u></u>		<del>-</del>
		त्यां	ω
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our record	ds, <u>enter the name of th</u>	<u>e new registered</u>
Name of New Registered Agent:	<del></del>		
New Registered Office Address:			
	Enter Florida str	reet address	
	, .	, Florida	
	City	Zip (	Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as paking filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my a rovided for in Chapt	hities, and I am familia ter 605, F.S. Or, if this	r with and 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>	Address	Type of Action
			□Add
		<del></del>	□Remove
		<del></del>	□Change
<del></del>			🗆 Add
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			□ Change
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			□Remove
			Change.

ffective date, if other than the date of filing:  (aptional)  (aptional)  (aptional)  (an effective date is listed, the date must be specific and cannot be prior to due of filing or more than 90 days after filing.) Pursuant to 605,0207  oftic: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as occument's effective date on the Department of State's records.  record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the is filed.  March 26.  2024  Signature of a member or authorized representative of a member						
Frective date, if other than the date of filing:				· · · · · · · · · · · · · · · · · · ·		_
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C.M. M.		te, but not an effect	ive time, at 12:01 a	.m. on the earlier of	(b) The 90th day a	fter the
Signature of a member or authorized representative of a member	March 26.	. 2024				
Signature of a member or authorized representative of a member	( A)	M				
		nature of a member or	authorized represent	ative of a member		

Filing Fee: \$25.00