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| (Requestor's Name) (Address) |
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| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Business Entity Hume) |
| |
| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer. |
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Office Use Only



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COVER LETTER

TO: Registration Section
Division of Corporations

| ANG Cons | ultation and Management LLC | | | | | |
|---|--|---|---------------------------|--|--------------|--|
| SUBJECT: | Name of Lim | ited Liability Company | | - | | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for filing. | | | | |
| Please return all correspo | ndence concerning this matter | to the following: | | | | |
| | Alexander Gerondale | | | | <u>3</u> | |
| | | Name of Person | - | | ? | |
| | ANG Consultation and Ma | anagement LLC | | ÷. | | |
| | | Firm/Company | | | \Box | |
| | 28 Park Place | | | | PM 12: 30 | |
| | | Address | | | : 30 | |
| | Panama City Beach, FL 32 | 2413 | | **1 | _ | |
| | | City/State and Zip Code | | | | |
| | ang.consulting.managment | | | _ | | |
| | E-mail address: (| to be used for future annual report not | ification) | | | |
| For further information c | oncerning this matter, please c | all: | | | | |
| Alexander Gerondale | | 920 819-0667 at () | | | _ | |
| Name o | f Person | Area Code Daytin | ne Telephone Numb | oer | | |
| Enclosed is a check for the | ne following amount: | | | | | |
| ■ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certifi | Filing Focate of S ed Copy nal copy is | tatus & | |
| Mailing Address Registration S Division of C P.O. Box 632 | Section Corporations 17 | Street Address: Registration Se Division of Co The Centre of T | rporations Fallahassee | | | |
| Tallahassee. | FL 32314 | 2415 N. Monro | e Street, Suite | 810 | | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| ANG Consultation and Management LLC | | |
|---|--|---|
| (<u>Name of the Limited Liability Compa</u> (A Florida Limited I | ny as it now appears on our re liability Company) | cords.) |
| he Articles of Organization for this Limited Liability Company | were filed on | and assigned |
| lorida document number L24000132698 | | |
| his amendment is submitted to amend the following: | | |
| . If amending name, enter the new name of the limited liab | ility company here: | |
| ANG Consulting and Management LLC | | |
| he new name must be distinguishable and contain the words "Limited Liabil | lity Company," the designation | 'LLC" or the abbreviation "L.L.C." |
| nter new principal offices address, if applicable: | No Changes | |
| Principal office address MUST BE A STREET ADDRESS) | | / ja |
| | | · |
| | | 7. |
| nter new mailing address, if applicable: | No Changes | |
| Mailing address MAY BE A POST OFFICE BOX) | | (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) |
| maning dataress MATT DISTITUTE DOM | | |
| | | 17 0 |
| Name of New Registered Agent: | address on our records, <u>er</u> | nter the name of the new reg |
| New Registered Office Address: | Enter Florida street ad | ddress |
| | | . Florida |
| | City | Zıp 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 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 |
|--------------|---------------------|--|----------------|
| AMBR | Alexander Gerondale | 28 Park Place, Panama City Beach, FL 32413 | = Add |
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| effective date is listed, the date must be specific and cannot be prior to date of filing or n | (optional) more than 90 days after filing | g) Pursuant to 605.0 |
| e: If the date inserted in this block does not meet the applicable statutory filir iment's effective date on the Department of State's records. | ng requirements, this date | e will not be listed |
| | | |
| ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. filed. | on the earlier of: (b) The | he 90th day after |
| 05/03/2024 ed | | |
| Alex Gerondale | | |
| 70.000 | | |