

L24000457968

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

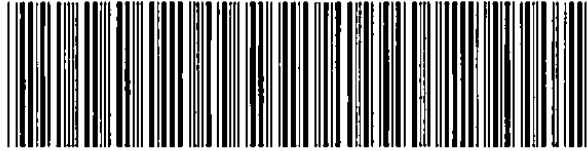
(Document Number)

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TALLAHASSEE, FL

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6-11-24

COVER LETTER

Registration Section
Division of Corporations

FISHBURN CONSULTING, LLC
CT: _____

Name of Limited Liability Company

closed Articles of Amendment and fee(s) are submitted for filing.

return all correspondence concerning this matter to the following:

JEFFREY E FISHBURN

Name of Person

FISHBURN CONSULTING, LLC

Firm/Company

1815 NW 24TH AVE

Address

CAPE CORAL, FL 33993

City/State and Zip Code

JEFFREY.FISHBURN@GMAIL.COM

E-mail address: (to be used for future annual report notification)

for further information concerning this matter, please call:

JEFFREY E FISHBURN

470

380-3380

at (_____) _____

Name of Person

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 &
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 Address:

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

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TALLAHASSEE, FL

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FISHBURN CONSULTING, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on 10/28/2024 and assigned
a document number L24000457968

Amendment is submitted to amend the following:

Amending name, enter the new name of the limited liability company here:

New name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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)

If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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

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TALLAHASSEE, FL

Manager
= **Authorized Member**

Address

Type of Action

1815 NW 24TH AVE

 Add

CAPE CORAL, FLORIDA, 33993

☐ Remove☐ Change

JESSICA FISHBURN

1815 NW 24TH AVE

☐ Add

CAPE CORAL, FLORIDA, 33993

 Remove

☐ Change

Add

Rem

☐ Chan

☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove

7/2/2000

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Add
Remove
Change
Add
SECRETARY OF STATE
TALLAHASSEE, FL

7-17-68

ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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TALLAHASSEE, FL

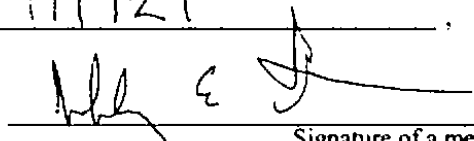
Effective date, if other than the date of filing: _____ (optional)

If the date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the member's effective date on the Department of State's records.

word 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 filing.

11/12/2024



Signature of a member or authorized representative of a member

Jeffrey E Fishburn

Typed or printed name of signer