

L99000003426

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

APR 19 2011

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Consulting Partners L.C.  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Mathieu Rodette  
Name of Person

Consulting Partners  
Firm/Company

555 NE 15th St. - #200  
Address

Miami, FL 33132  
City/State and Zip Code

info@barclaysrealestate.com  
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Mike Perez at (786) 433-4693  
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/COURIER ADDRESS:  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 7, 2011

MATHIEU ROCHETTE  
CONSULTING PARTNERS, L.C.  
555 NE 15TH ST. #200  
MIAMI, FL 33132

SUBJECT: CONSULTING PARTNERS, L.C.  
Ref. Number: L99000003426

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for CONSULTING PARTNERS, L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

The document number of the name conflict is #P00000051177, MATHIEU ROCHETTE, P.A..

The name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan  
Regulatory Specialist II

Letter Number: 511A00008460

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

Consulting Partners LL.C.  
(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 1/27/06 and assigned  
Florida document number L9900003426.

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 end with 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)

**B. 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 608, 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, FLORIDA

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

| <u>Title</u> | <u>Name</u>      | <u>Address</u>                               | <u>Type of Action</u>  |
|--------------|------------------|--|--|
| MGR          | Mathieu Rochette | 520 E. Dilido Drive<br>Miami Beach, FL 33139 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |                  |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                  |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                  |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                  |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
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|              |                  |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

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 TALLAHASSEE, FL 32304

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

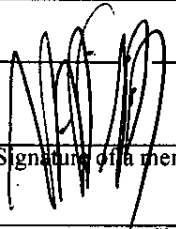
\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

Dated April 13 2011



\_\_\_\_\_  
Signature of a member or authorized representative of a member

Philippe Rochette  
\_\_\_\_\_  
Typed or printed name of signee