L03000052368

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

J. BRYAN

SEP - 5 2008

EXAMINER

COVER LETTER

File#1. See below. TO: Registration Section **Division of Corporations** SUBJECT: Sinter Partners, LLC (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: Braton Cole (Name of Person) Sinter Group, LLC fka Sinter Partners, LLC (Firm/Company) 311 N Bayshore Drive (Address) Safety Harbor, FL 34695 (City/State and Zip Code) For further information concerning this matter, please call: **Braton Cole** at (727) 608-1022 (Area Code & Daytime Telephone Number). (Name of Person) Enclosed is a check for the following amount: \$60.00 Filing Fee, \$25.00 Filing Fee \$30.00 Filing Fee & \$55:00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) 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

File this amendment before enclosed amendment for University Partners LLC.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Sinter Partners, LLC		,
(Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our records.) oility Company)	
The Articles of Organization for this Limited Liability Company we	ere filed on <u>12/11/2003</u>	and assigned
Florida document number <u>L03000052368</u>		
This amendment is submitted to amend the following:	FSIN	20-078636
A. If amending name, enter the new name of the limited liabilit	y company here:	
Sinter Group, LLC The new name must be distinguishable and end with the words "Limited "L.L.C."	Liability Company," the designation	"LLC" or the abbreviation
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	e address on our records, <u>enter</u>	the name of the new
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		
-	(Enter Florida street a	address)
	, Florida _	(Zip Code)
((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 c	uaree to comply with

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)

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

<u>itle</u>	<u>Name</u>	<u>Address</u>	Type of Actio
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If amend	ling any other information, onter change	ge(s) here: (Attach additional sheets, if necessary.)	
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ated		LG:	
	Signature of a member	r or authorized representative of a member	
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Page 2 of 2

Filing Fee: \$25.00