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DEPALITIES OF STATE OF STATE OF CORPORATIONS OF CORPORATIONS TALL AND SEEL FLORIDA

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OR MAY 22 AH 9: SECRETARY OF STATE

T. HAMPTON

MAY 2 3 2008

EXAMINER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Liquid net es (LC:	
	•
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Merger File Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
·	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
Signature	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
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Name Date Time	UCC 11 Retrieval

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ARTICLES OF AMENDMENT TO

08 MAY 22 AM 9: 52

ARTICLES OF ORGANIZATION SECRETARY OF STATE

OF

TALLAHASSEE, FLORIDA

Liquid net c	15 LLC				•
(Name of the Limited Linb (A Flori	lity Company	y as it now appe	ars on o	ir records.	
(A FIOT	ds rimited fits	somicy Company	,		
The Articles of Organization for this Limited Liabilit	y Company v	vere filed on	Feb :	7 2008	and assigned
Florida document number 108 0000 20573					
This amendment is submitted to amend the following	ζ.				
				ı	
A. If amending name, enter the new name of the	mited liabil	ty company h	ere:		
The new name must be distinguishable and end with the "L.L.C."	words "Limite	ed Linbility Com	peny," th	e designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:		1040	se 7	r ct	
(Principal office uddress MUST BE A STREET ADDRESS)		Apt	307		
		PANIR	Brack	F1 3300) cf
Enter new mailing address, if applicable:		1040	SE	75 ct.	
(Mailing address MAY BE A POST OFFICE BOX)					
	Dania Bough F/. 33004				
B. If amending the registered agent and/or re			our re	cords, <u>enter</u>	the name of the new
registered agent and/or the new registered office a	ddress here:	•			
					•
Name of New Registered Agent	Boris (Sancher 1	Pach	<u></u>	
New Registered Office Address:	1040	4 5 7 C. J.	1.	A 200	ddress)
Trew Proposition Durice / Marcos.		<u> </u>	Enter Pla	orida street a	ddress)
· ,	1/0110	10th		_, Florida _	33004 (Zip Code)
· · · · · · · · · · · · · · · · · · ·		(City)			(Lip Code)
New Registered Agent's Signature, if changing Regist.	CITO ACOUT:				

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

(If Changing Registered Agent, Signature of New Registered Agent)

company has been notified in writing of this change.

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Type of Action Address Title. <u>Name</u> Boris Garcher Pencher 1040 SE ☐ Remove 🗂 Add ☐ Remove Add 🗂 Remove □ Add Remove Remove . [∏ Add 🗖 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 200€ Dated Signature of a member or authorized representative of a member Boris Ganchev Penchev
Typed or printed name of signee

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

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