# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

Account Name : LEGALZOOM.COM INC.

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PRIME CATALYST SOLUTIONS LLC

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MAY - 9 2011

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### **FAX COVER SHEET**

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COMPANY	
FAX NUMBER	18506176383
FROM	Ani Muradian
DATE	5/6/2011 11:41:13 AM PDT
RE	500701348 Prime Catalyst Solutions LLC

#### COVER MESSAGE

Ani Muradian | Business Special Filing Specialist 323.962.8600 x 7950 | Fax 323.962.8300 | amuradian@legalzoom.com www.legalzoom.com<a href="http://www.legalzoom.com/">http://www.legalzoom.com/</a> | 101 N. Brand Blvd., 10th Floor Glendale, CA 91203

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May.28.2009 09:03 PM

		COVER LETTER			
TO: Registration S Division of Co					
SUBJECT: PRIME	CATALYST SOLUTION	15 LLC			
	(Name of Lan	nited Liability Company)			
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing			
Means totam all consesp	eurgenne conneumant sanapse	t to the following.			
	Barbara Dang	(Name of Person)			
	Legalzoom.com, Inc	(Firm/Company)	<u> </u>		
	100 W. Broadway S	uite 100 (Address)			
	Glendale, CA 91210	(City/Stute and Zip Code)			
For further information	concerning this matter, please of	call:		1 <b>6.</b> 3	
Barbara Dang (Name	of Person)	at ( 323 ) 962-8600 (Area Code & Daytime T		2011 RAY -6 SECRETARY ALLAHASSE	caronin
Enclosed is a check for t	he following amount:		i	71	
\$25 00 Filing Fee	S30 00 Filing Fee & Certificate of Status	▼\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee.	F STAT	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tullahassee, Ft. 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2001 Executive Center Circle
Tallahassee, FL 32301

May.28.2009 09:04 PM

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRIME CATALYST SOLUTIONS LLC

(Name of the Limited Lie (A Flo	rida Limited Liability Company	n's oit dur records.)		
The Articles of Organization for this Limited Liabs Florida document number <u>L09000120684</u>	lity Company were filed on 12	2/21/2009	and assigne	d
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of th	e limited liability company h	ere;		
The new name must be distinguishable and end with the "1.1.C."	e words "Limited Liability Com	pany," the designation "U	LC" or the abbre	viation
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter th	ne name of th	e new
Name of New Registered Agent:			SE	20
Name of Ivew Registered Atlent.		······································	ARE	
New Registered Office Address				
	(1	Enter Florida street add	(7) 70	7
-	<u> </u>	, Florida		
	(Ci(y)		(Zipe Ode)	E present
			- SKA	P
New Registered Agent's Signature, if changing Regi	stered Agent:		166 176 176 176 176	

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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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>	Address	Type of Action
MGR_	Jon Francis Glema	2180 PARK AVE, NORTH BUILDING, STE WINTER PARK EL 32789 US	E. 100 7 Add Romove
MGR	Christopher Aniske	wicz 2180 PARK AVE, NORTH BUILDING, STE WINTER PARK FL 32789 US	. 100 🗸 Add Remove
·			Add Remove
			Add Remove
<del></del>			Add Romevo
- · <u> </u>	· ·		2011 BAY S更是ETA
D. Ifam	-	, enter change(s) here: (Attach additional sheets, if necessa	ARY O
	JON A GLEMAN will ass	the management structure to managers and unter the title manager.	F STATE FLORIDA
No. 1		2011	
Dated	Signatu	re of a member of authorized representative of a member	
	Jon Adam Gleman, m	anaging member	
		Typed or printed name of signor	<del></del>

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Filing Fee: \$25.00