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9/30/2011 03:02 PM PDT

323-962-8300 From: Natali Karniouchina

Division of Corporations

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Florida Department of State
Division of Corporations
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TALLAHASSEE, FLORIDA

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CELEBRATE REWARDS LLC

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FAX COVER SHEET

TO	
COMPANY	
FAX NUMBER	18506176383
FROM	Natalja Karniouchina
DATE	9/30/2011 3:02:36 PM PDT
RE	U.S. DEBT SETTLEMENT LLC - 501526480

COVER MESSAGE

Natalja Karniouchina
Legal Document Preparation Specialist
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CELEBRATE REWARDS 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:

Barbara Dang

(Name of Person)

Legalzoom.com, Inc.

(Firm/Company)

100 W. Broadway Suite 100

(Address)

Glendale, CA 91210

(City/State and Zip Code)

For further information concerning this matter, please call:

Barbara Dang

(Name of Person)

at (323) 962-8600

(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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

CELEBRATE REWARDS LLC

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

FILED
11 OCT -3 AM 10:21
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 01/27/2011 and assigned
Florida document number L11000011478.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

U.S. DEBT SETTLEMENT LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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:

TOM H. LINDER

New Registered Office Address:

3764 SAYBRACK PLACE

(Enter Florida street address)

Bonita Springs

(City)

Florida

34134

(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.

Tom H. Linder

(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
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	TOM H. LINDEN	3764 Saybrook Place, Bonita Springs, FL 34135	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	TOM H. LINDEN	28526 AZZILI WAY BONITA SPRINGS FL 34135 US	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Article II - The street address of the principal office of the Limited Liability Company is:

3764 Saybrook Place, Bonita Springs, FL 34135

The mailing address of the Limited Liability Company is:

3764 Saybrook Place, Bonita Springs, FL 34135

Dated Sept 21, 2011

Tom H. Linden

Signature of a member or authorized representative of a member

Thomas H. Linden

Typed or printed name of signee