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K. SALY EXAMINER JUL 2- 2012

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Mahason + Associates LLC. Name of Limited Liability Company
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:
MELISSA NELSON Name of Person
Manason + Associates UC Firm/Company
315 NE 300 AVE SUITE 2006
Fort Lauderdale FL 33301 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MELISSA NELSON at (954) 263-3506 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount: \$\sum{\$25.00 \text{ Filing Fee}} \sum{\$\$55.00 \text{ Filing Fee}} & \sum{\$\$55.00 \text{ Filing Fee}} & \sum{\$\$60.00 \text{ Filing Fee}}, \text{ Cariffacts of Status \$\$}
Certificate of Status (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	12 JUN 20
7	12 JUN 25 AM 11: 37
	AM 11: 37 ATTATIASSEE, A ORIDA

Mahason + As	SOCICITES LLC Ity Company as it now appears on our records.)
(<u>Name of the Limited Liabili</u> (A Florida	SOCICHES LLC ity Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability	Company were filed on 3 19 2012 and assigned
Florida document number LT 2000037950	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the li	mited liability company here:
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADL	DRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	istered office address on our records, enter the name of the new ldress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida

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

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 **Address Title** <u>Name</u> **Type of Action** CEO+ MELISSA NELSON 315 NE 3ED AVE 578 2006 Founder FORT LAUDER DALE FL 33301 MGR SEAN D. MAHABIR Remove ☐ Add Remove Add □Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) I would like to change mELISSA NELSON'S title to CEO + Founder of MAHASON + ASSOCIATES LLC. Dated Jone 15* . 2012 . Signature of a member or authorized representative of a member MELISSA NELSON
Typed or printed name of signee

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Filing Fee: \$25.00