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SECRETARY OF STATE TALLAHASSEE, FLORIDA

009 MAY -4 AM 10: 3.

COVER LETTER

TO: Registration So Division of Con					
SUBJECT: L, F OF	RD, LLC (Name of Lim	ted Liability Company)		D	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	John Morgan Brunson, E				
		(Name of Person)			
		(Firm/Company)			
	4250 Central Avenue		<u>.</u>		
		(Address)		200 TAE	
	St. Petersburg, FL 3371	(City/State and Zip Code)	<u>-</u>	ORE LAH	7
For further information of	concerning this matter, please c			2009 MAY -4 AM 10: 36 SECRETARY OF STATE FALLAHASSEE, FLORID!	
John Brunson		at (727) 828-0580		-101 -100 -100 -100	O
(Name	of Person)	(Area Code & Daytime T	elephone Number)	IO: 36 STATE ORIDA	
Enclosed is a check for t	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 Certificate of Certified Co (additional of	of Status &	

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

(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appe ability Company	ars on our rec	ords.)		
The Articles of Organization for this Limited Liability Company	were filed on 12	2/17/08		and ass	
Florida document number L08000114953				Z S	200
This amendment is submitted to amend the following:				CRETAR LAHASS	7009 HAY -4
A. If amending name, enter the new name of the limited liabil	lity company h	ere:		HO Y	⇒ 「
FUTURES CONSULTING, LLC				77	<u> </u>
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Com	pany," the desi	gnation "LL		ib ြာ viation ဲ ယ
Enter new principal offices address, if applicable:		Harn	Blvd	\$4	<u>б</u>
(Principal office address MUST BE A STREET ADDRESS)	Clear	water	<u>FL</u>	337	64
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)					
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		our records	s, <u>enter th</u> e	e name o	f the new
Name of New Registered Agent:			· · · · · · · · · · · · · · · · · · ·		
New Registered Office Address:					
	(Enter Florida street address)				
		F	lorida		
	(City)	, ·		(Zip Coa	!e)
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 = Mana MGRM = Ma	ager naging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
		,	2009 May SECANDA TALL
			SSE PAdd AM
			O: 36 ORIO Ald Add Remove
D. If amendi	ng any other information, enter change	e(s) here: (Attach additional sheets, if necessary,)
_			
		,	
Dated April 29	, 2009	·	
	•	or authorized representative of a member	
	Art Gisonni, Manager Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00