

L13000151494

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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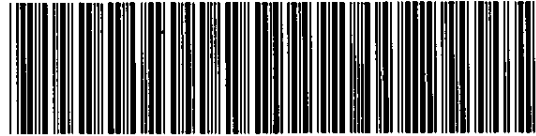
(Business Entity Name)

(Document Number)

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DBRACE



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 957121 7962504

AUTHORIZATION :

COST LIMIT : \$ 250000

ORDER DATE : January 10, 2014

ORDER TIME : 12:48 PM

ORDER NO. : 957121-011

CUSTOMER NO: 7962504

DOMESTIC AMENDMENT FILING

NAME: BOTA SUPPORT SERVICES, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER'S INITIALS: _____

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TALLAHASSEE FL 32304

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BOTA SUPPORT SERVICES, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 10-24-2013 and assigned
Florida document number L13000151494.

This amendment is submitted to amend the following:

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

PRODUCTION SUPPORT SERVICES, LLC

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

City, Florida 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 605, 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

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

[Handwritten: A diagonal line is drawn across the four horizontal lines.]

E. Effective date, if other than the date of filing: 1-1-14 (optional)
(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated 1-13-, 2014.

[Handwritten signature: Ana S. Pomaes]

Signature of a member or authorized representative of a member

ANA S POMALES, MEMBER

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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