(((H09000256275 3)))

below) on the top and bottom of all pages of the document.



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet

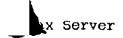
From: Ac Ac Pl	ivision of Corporations ax Number : (850)617-6383 count Name : CORPORATION SER count Number : 120000000195 hone : (850)521-1000 ax Number : (850)558-1575	Old mare	
From: Ac Ac Pl	ex Number : (850)617-6383 count Name : CORPORATION SER count Number : 120000000195 cone : (850)521-1000		
Ac Ac Pl	none : (850)521-1000		
		,	t Rud. Vene formation
	ail address for this business emport mailings. Enter only one	ntity to be used	for future
Email Add	ress:		
			SECTION OF THE SECTIO
LLC	AMND/RESTATE/CORRECT	OR M/MG RESI	90EC 10 SECRETAR'S SALLI ANASS
-	MICHAEL P. KAHN & ASSO	CIATES, LLC	
	Certificate of Status	0	AM 8: 34 OF STATE
W E	Certified Copy	0	92 3 3
[변절 [Page Count	04	Şm 🗲
· 158	Estimated Charge	\$25.00	

Electronic Filing Menu

Corporate Filing Menu

Help J. BRYAN

DEC 1 1 2009 EXAMINER



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Michael P. Kahn & Associates, LLC	Daniel Da	···
(Name of the Limited Liability Compa (A Florida Limited)	Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on June 12, 2001	and assigned
Florida document number <u>L01000009361</u>		
This amendment is submitted to amend the following:		O91
A. If amending name, enter the new name of the limited liah	ility company here:	经 四 二
Kahn Consulting LLC		芸二
The new name must be distinguishable and end with the words "Limi "L.L.C."	ited Liability Company," the designation '	'LLC" or the attriceviation
Enter new principal offices address, if applicable:	917 South 1st Street, #1101	
(Principal office address MUST BE A STREET ADDRESS)	Jacksonville Beach FL 322	50 957 2
Enter new mailing address, if applicable:	8270 Greensboro Drive, Sui	ite 810
(Mailing address MAY BE A POST OFFICE BOX)	McLean, Virginia 22102	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:		
	, Florida	
- · · · · · · · · · · · · · · · · · · ·	(Ciņi)	(Zip Code)
No. 178. Proceed to the Oleman control of the contr		

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 firther 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 = Man MGRM = M	iager anaging Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Pepi A. Kahn	330 ALA North, Suite 322 Ponte Vedra Beach, EL 32082	Add Remove
1			Add Remove
			Remove
Vingo and Grant Conference of the Party of t			Add Remove
			Add Remove
D. If amendi		change(s) here: (Attach additional sheets, if nocessary.) 2009	09 DEC 10 AH 8: 34 SECRETARY OF STATE TALLAHASSEE, FLORIDA
	~	nember or authorized representative of a member	
	Michael P. Ka	thn, Manager Typed or printed name of signee	postula de la Spir que ausar d

Page 2 of 2

Fifing Fee: \$25.00