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T. HAMPTON APR - 1 2010

EXAMINER

COVER LETTER

TO: Registration Division of C				
SUBJECT:	Golden Market	ing Opportunities, LLC		
Sobolet.	······································	ited Liability Company		
The enclosed Articles	of Amendment and fee(s) are sul	bmitted for filing.		
Please return all corre	spondence concerning this matter	r to the following:		
	<u>-:</u>	Adam Scott Goldberg Name of Person		
		Name of Feldon		
	Krause & Goldberg P.A.			
		Firm/Company		
1792 Bell Tower Lane				
		Address		
	V	Veston, Florida 33326		
		City/State and Zip Code		
	E-mail address:	estonlawyers@aol.com (to be used for future annual report notification	on)	
For further informatio	n concerning this matter, please	call:		
	m Scott Goldberg		7-1400	
Nam	e of Person	Area Code & Daytime Te	lephone Number	
Enclosed is a check for	or 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)	
Reg Div P.O	ILING ADDRESS: istration Section ision of Corporations . Box 6327 ahassee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle	

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

Golden M	larketing Opportunities	s, LLC	
(A F)	ability Company as it now appea orida Limited Liability Company)	is on our records.	
The Articles of Organization for this Limited Liab	ility Company were filed on	June 13, 2002	and assigned
Florida document number H0200016026	12 4749		
This amendment is submitted to amend the follows	ing:		
A. If amending name, enter the new name of the	e limited liability company he	ere:	
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Comp	pany," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicab	le:	<u></u>	<u> </u>
(Principal office address MUST BE A STREET	ADDRESS)		→ ×18
	<u> </u>		
			S CONTRACTOR
Enter new mailing address, if applicable:		···	- 637
(Mailing address MAY BE A POST OFFICE BO	<u></u>		7 20 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
	<u> </u>		RATA
			100 20 10
B. If amending the registered agent and/or registered agent and/or the new registered offic		our records, enter the	e name of the hew
			
Name of New Registered Agent:			·
New Registered Office Address:			
	E_{\cdot}	nter Florida street addre	SS
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Reg	istered 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

MGR = Ma MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	William Bransburg	P.O. Box 480261 Fort Lauderdale, Florida 33348-0261	Add Remove
			Add Remove
-			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter o	change(s) here: (Attach additional sheets, if necessary.)	=
			SECRETARY IVISION OF C
 Dated	MARCH 3C	Z010_	PH 12! 16
	Signature of a n	ence Soldner iember or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00