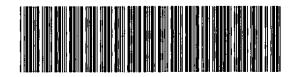
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SECRETARY OF STATES ALL AHASSEE. FLORIDA

J. SAULSBERRY EXAMINER

DEC 29 2011

## **COVER LETTER**

то:	Registration S Division of Co			
SUBJI	FCT:	R.D. Lipper	t & Associates, LLC	
3000	<u></u>		ited Liability Company	
The en	closed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please	return all corresp	ondence concerning this matte	r to the following:	
			Mr. Richard D Lippert	
			Name of Person	<b>5 2</b>
				SEC!
			Firm/Company	HASS
		1096	Rainer Drive, Suite 1001	MII DEC 27 AM 8: 2 SECRETARY OF STATE ALLAHASSEE, FLORID
			Address	FLS
		Altai	monte Springs, FL 32714	AH 8: 21 DF STATE FLORIDA
			City/State and Zip Code	<b>&gt;</b> "
		rich E-mail address: (	nard.lippert@gmail.com to be used for future annual report notification)	
For fur	ther information	concerning this matter, please of	call:	
	Mr. R	ichard D Lippert	at ( 407 ) 598-1500	1
	Name	of Person	Area Code & Daytime Telephone N	Jumber
Enclose	ed is a check for t	the following amount:		
<b>=</b> \$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Ce	00 Filing Fee, rtificate of Status & rtified Copy Iditional copy is enclosed)
	Regist Divisi P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER ADDRE Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	SS:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

R.D. Lippert & A	ssociates, L	LC	
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appea Liability Company)	rs on our records.	
The Articles of Organization for this Limited Liability Company Florida document numberL0300008702	were filed on	03/10/2003	and assigned  and assigned  SECRETI  ALL AHA
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability.			LED 27 AH 8: SSEE, FLOR
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Comp	any," the designation "	LLS of the abbreviation
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)	P.o. B. Altama	ox 160129 onte Spring	s FL 327/6-018
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		our records, <u>enter</u>	the name of the new
Name of New Registered Agent:  New Registered Office Address:			
Terr registered Critica Madiess.	En	ter Florida street add	dress
		. 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 Type of Action Title Name **Address** MGRM Karen E Lippert 206 Wessex Road 🗹 Add Altamonte Springs, FL 32714 Remove ☐ Add Remove ☐ Add Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) December 1st 2011 Dated\_ Signature of a member or authorized representative of a member

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00

Richard D Lippert, Jr.