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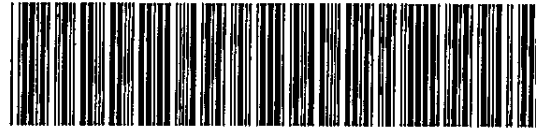
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VICTORIA DOLCI DESIGNS, LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

VICTORIA DOLCI

(Name of Person)

VICTORIA DOLCI DESIGNS, LLC

(Firm/Company)

2716 Forsyth Road, Suite 105

(Address)

Winter Park, FL 32792

(City/State and Zip Code)

SECTION OF
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

VICTORIA DOLCI

(Name of Person)

at (407) 325-7432
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|---|--|--|

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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

VICTORIA DOLCI DESIGNS, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on May 20, 2004 and assigned document number L04000033144.

SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

Manager Member Gena Vandewalker has resigned as such and will be replaced by Michele K. McLaughlin as a Manager Member.

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04 JUL 16 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated June 25, 2004.

Victoria Dolci

Signature of a Member or Authorized Representative of a Member

Victoria Dolci

Typed or Printed Name of Signee

Filing Fee: \$25.00