L0400065002

(Requestor's Name)				
(Address)				
(100,000)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(,,,				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer.				
Special instructions to Filing Onicer.				
·				

Office Use Only

B. KOHR

SEP 1 3 2011

EXAMINER



400211934424

09/13/11--01005--023 **30.00

VOIDO PROSESSE AND LANGE OF THE SHORT OF CARBON STATE OF THE SHORT OF THE SHOTT OF THE SHORT OF

RECEIVED

11 SEP 13 PM 1: 29

CORPORATE When you need ACCESS to	the world"
ACCESS, INC. 236 East 6th Avenue , Tallahassee, Flori	
,	1a 32308) 969-1666 . Fax (850) 222-1666
WALK IN	7 13 8 COMPOS S
PICK UP: 9/13 am	- 1.2°
CERTIFIED COPY	
РНОТОСОРУ	
© cus	
FILING LLC Amer	idment
1. UNITELL WORLWIDE COMMU. (CORPORATE NAME AND DOCUMENT #)	NICATIONS, LLC
2. (CORPORATE NAME AND DOCUMENT #)	
3. (CORPORATE NAME AND DOCUMENT #)	
4. (CORPORATE NAME AND DOCUMENT #)	
5. (CORPORATE NAME AND DOCUMENT #)	
6. (CORPORATE NAME AND DOCUMENT #)	
SPECIAL INSTRUCTIONS:	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1 SEP 13 PM 1.29

UNITELL WORLWIDE COMMUNICATIONS, 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 Liabil	lity Company were filed on	November 17, 2004	_ and assigned
Florida document number L040008500	<u>2</u>		
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability company	here:	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Co	ompany," the designation "LLC	C" or the abbreviation
Enter new principal offices address, if applicable	<u></u>		·
(Principal office address MUST BE A STREET A	DDRESS)		
		· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>		<u></u>
B. If amending the registered agent and/or r registered agent and/or the new registered office		on our records, enter the	name of the new
Name of New Registered Agent:			
New Registered Office Address:			
		Enter Florida street addres	5
_		, Florida	
_	City		Zip Code
New Registered Agent's Signature, if changing Regis	stered Agent:		
I hereby accept the appointment as registered ag the provisions of all statutes relative to the propo accept the obligations of my position as registere being filed to merely reflect a change in the regis	er and complete performa	nce of my duties, and I am	familiar with and

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

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:

MGRM = 1	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Robert A Henry	9050 Pines Blvd Ste 364 PEMBROKE PINES FL 33024	Add Remove
<u>MGR</u>	Philip Browne	9050 Pines Blvd Ste 364 PEMBROKE PINES FL 33024	Add Remove
	·		Add Remove
			Add Remove
 			Add Remove
			Add Remove
D. If amen	ding any other information, enter o	change(s) here: (Attach additional sheets, if necessary.)	_
	,		_ _
_	September 12	2011	
Dated			
	Edna E	dwards	
	Signature of a m	ember or authorized representative of a member	
		Edna Edwards Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00