Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : GRANT, FRIDKIN, PEARSON, ATHAN & CROWN, P.A.

Account Number : 076402003516

Phone : (239)514-1000 : (239)514-0377 Fax Number

**Enter the email address for this business entity to be used for furier annual report mailings. Enter only one email address please. **

Address: 58

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ORGANIZE YOUR SPACE, LLC

Certificate of Status Certified Copy 1 02 Page Count \$60.00 Estimated Charge

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO AMENDED AND RESTATED ARTICLES OF ORGANIZATION OF

ORGANIZE YOU	R SPACE,	LLC				
(Name of the Limited Liability Compar (A Plorida Limited L	ny as it now app liability Company	ears on our records	<u>s.</u>)			
Amended and Restated The Articles of Organization for this Limited Liability Company	were filed on _	AUGUST 29,	2007 and as	ssigned		
Florida document numberL05000027321						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liab	ility company l	nere:				
CABNU,						
The new name must be distinguishable and end with the words "Limit" L.L.C."	ted Liability Con	npeny," the designat	ion "LLC" or the	abbreviation		
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADDRESS)			AL SE	-		
			A.S.	<u> </u>		
			ST.			
Enter new mailing address, if applicable:				cu i		
(Mailing address MAY BE A POST OFFICE BOX)						
			52.			
		_		න `വ		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address of e:	n our records, <u>er</u>	iter the name	of the new		
Name of New Registered Agent:	_=					
New Registered Office Address:						
		Enter Florida street address				
		, Florida				
	City		Zip Cod	le		
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.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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:

	- Manager I = Managing Member			
<u>Title</u>	Name	Address	Type of Action	<u>1</u>
			Add Remove	
			Add Remove	
			Add Remove	
	_		Add Remove	
	·		Add Remove	
			Add Remove	
D. Yfai	mending any other information, enter change(s	s) here: (Attach additional sheets, if necessary.)		
			AHI OF S	
	THE ABOVE CONTAINS ONE (1) AME	ENDMENT, TO CHANGE THE NAME.	1:58 TATE PRIDA	
Dated _	NOVEMBER 12 , 2010	<u>) </u>		
		authorized representative of a member		
	DAVID G. BUDD, as authorized or	norized representative of a member printed name of signee		

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Filing Fee: \$25.00