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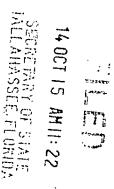
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COVER LETTER

TO: Registration Section **Division of Corporations**

Grindstone Management, 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:

Mary Pat Hevener

Name of Person

Grindstone Management, LLC

Firm/Company

6300 NE 1st Avenue, Suite 300

Address

Fort Lauderdale, FL 33334

City/State and Zip Code

mph@roschman.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Pat Hevener

at (954) 776-7900 ext 2221

Name of Person

Enclosed is a check for 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)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Grindstone Management, LLC			
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	pany as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Compan Florida document number <u>L05000033912</u>	y were filed on April 6, 2005	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
The new name must be distinguishable and end with the words "Limited Lie	ability Company," the designation "LLC" or the	ne abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:	6300 NE 1st Avenue, Suite	300	
(Mailing address MAY BE A POST OFFICE BOX)	Fort Lauderdale, FL 33334		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		er the name of the new	
Name of New Registered Agent:		- 	
New Registered Office Address:	Enter Florida street address , Florida	E ARY L	
	City	Zip Code i !!	
New Registered Agent's Signature, if changing Registered Agent	<u>t:</u>		
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as	e performance of my duties, and I a	n familiar with and	

If Changing Registered Agent, Signature of New Registered Agent

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 amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member <u>Title</u> Name <u>Address</u> **Type of Action Brian Smith MGRM** 6300 NE 1st Ave. Suite 300, Ft Lauderdale, FL 33334 □ Add **■** Remove **Brian Smith** MGR 6300 NE 1st Ave. Suite 300, Ft Lauderdale, FL 33334 **■** Add ☐ Remove ☐ Add ☐ Remove □ Add ☐ Remove □ Remove... □ Add □ Remove

If amending any other info	ormation, enter change(s) here: (Attach additional sheets, if neo	cessary.)
•		
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<u> </u>		-
the date this document is filed by	n the date of filing: (opt c, cannot be prior to date of receipt or filed date and cannot be more than 90 days the Florida Department of State)	ional) after
Dated October 9	2 014	
Dated	·	
	Signature of a member or authorized representative of a member	
	Λ··	
	Lain Jant	

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE