L05000053888

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Вс	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



900246944749

04/26/13--01026--032 **30.00

2013 APR 26 AM 8: 32

J. SAULSBERRY EXAMINER APR 30 2013

COVER LETTER

TO: Registration S Division of Co					
SUBJECT: N	IORTH-SOUTH CAPITAL GR Name of Limite	ROUP LLC ed Liability Company			
The enclosed Articles of	f Amendment and fee(s) are subr	nitted for filing.			
Please return all corres	condence concerning this matter (to the following:			
	Jeffrey S. Raynor	, Vice President			
	Jeck, Harris, Rayı				
		Firm/Company			
	790 Juno Ocean Wa	lk, Suite 600		2013 APR	د پ
		Address		PR	
	Juno Beach, FL 3	3408-1121 City/State and Zip Code		26 AM	
	bitove@obelysk.co	m .		्रमुख्य प्र	٠.,
For further information	e-mail address: (to	be used for future annual report notificate	ion)	32	
Stacy Kohn Name	of Person	at (561) 746.1002 Area Code & Daytime Te	elephone Number		
Enclosed is a check for	the following amount:				
□ \$25.00 Filing Fee	XX\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Certified Contact (additional of	of Status &)

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

NORTH-SOUTH CAPITAL GR			26
(Name of the Limited L (A F	iability Company Iorida Limited Lia	as it now appears on our records.) bility Company)	3
The Articles of Organization for this Limited Lia	bility Company w	ere filed on 6/1/05	and assigned
This amendment is submitted to amend the follow A. If amending name, enter the new name of the second seco		ty company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited	d Liability Company," the designation '	'LLC" or the abbreviation
Enter new principal offices address, if applical	ble:	161 Bay Street, Suite	2300
(Principal office address MUST BE A STREET	'ADDRESS)	Toronto, ON M5J 2-S1	CD
Enter new mailing address, if applicable:		161 Pay Street, Suite	2300
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>	Toronto, ON: M5J 2-S1	CD
B. If amending the registered agent and/or registered agent and/or the new registered offi	r registered offic ice address here:	ce address on our records, enter	the name of the new
Name of New Registered Agent:	Jeck, Harri	s, Raynor & Jones, P.A.	
New Registered Office Address:	790 Juno Oc	ean Walk, Suite 600 Enter Florida street aa	ldress
	Juno Beach	, Florida	33408-1121
		City	Zip Code

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. JECK, HARRIS, RAYNOR & JONES, P.A.

By:
If Changing Registered Agent, Signature of New Registered Agent
Jeffrey S. Raynor, Vice President
Page 1 of 3

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 Title Title <u>Name</u> Address Type of Action Remove Remove 2013 Remove ထု 32 Remove Remove Remove

*Mailing Address for M	Manager/Member:	
FLON ACQUISITIONS GROU	JP LLC	
*161 Bay Street, Suite	2300	
*Toronto, ON M5J 2-S1	CD	
ated April 25		
	e of a member or authorized repressanting S. RATH	M er
		Mer
	e of a member or authorized representating of RATIO	
	e of a member or authorized represonately of RATIO	2013 APF
	Typed or printed name of signee Page 3 of 3	