L0500019858

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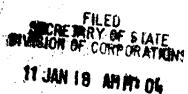
PICE BARY OF STATE BIVISION OF CORPORATIONS

N. Culligan JAN 192011

COVER LETTER

	Division of Cor				
SUBJE	СТ•	The	Firm LLC		
SODJE	CI	Name of Limited Liability Company			
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
			Maurice Thornton		
	•	Name of Person			
		The Firm LLC			
		Firm/Company			
		121 S.Orange Avenue #1500			
			Address		
		0	rlando , Florida 32801 City/State and Zip Code		
		ma	City/State and Zip Code mau12ice@hotmail.com		
		E-mail address: (to be used for future annual report notification)		
For furt	ner information of	concerning this matter, please of	call:		
Maurice Thornton Name of Person			at (_407) 927-1386 Area Code & Daytime Telephone Number		
		he following amount:			
\$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)		
	Regist Division P.O. B	ING ADDRESS: ration Section on of Corporations lox 6327 assee, 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



The Firm			
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records. Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document numberL0500079858	were filed on 08\15\2005 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited liab</u>	oility company here:		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation "LLC" or the abbreviati		
Enter new principal offices address, if applicable:	121 S.Orange Avenue , 15th floor		
(Principal office address MUST BE A STREET ADDRESS)	Orlando , Florida 32801		
Enter new mailing address, if applicable:	121 S. Orange Avenue , 15th floor		
(Mailing address MAY BE A POST OFFICE BOX)	Orlando , Florida 32801		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her			
	_		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
·	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.

If Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Craig Mapp	6125 S. Semoran blvd Orlando - Florida 32822	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
_			FILE
			OF STATE
	· ,	er or authorized representative of a member	
	Typec	d or printed name of signee	

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Filing Fee: \$25.00