

LOS000102867

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2016-12-21 16:33:10 CST

12122023573 From: Kimberly Laughrey

12/20/2016

Division of Corporations

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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

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From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

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

Email Address: _____

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TALLAHASSEE, FLORIDA
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COMBINED RESOURCES, LLC

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DEC 23 2016

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

CombinedResources,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 Liability Company were filed on October 18, 2005 and assigned Florida document number L05000102867

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the 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:

(Mailing address MAY BE A POST OFFICE BOX)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: CT Corporation System

New Registered Office Address: 1200 South Pine Island Road

Enter Florida street address

Plantation, Florida 33324
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 605, 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.

Kristin Bolden
Assistant Secretary

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Roy Serpa	1100 Park Central Blvd.	<input type="checkbox"/> Add
		Suite 3400	<input type="checkbox"/> Remove
		Pompano Beach, Florida 33069	<input type="checkbox"/> Change
MGR	David Powell	1100 Park Central Blvd.	<input type="checkbox"/> Add
		Suite 3400	<input type="checkbox"/> Remove
		Pompano Beach, Florida 33069	<input type="checkbox"/> Change
MGR	Hunter Peterson	1100 Park Central Blvd.	<input type="checkbox"/> Add
		Suite 3400	<input type="checkbox"/> Remove
		Pompano Beach, Florida 33069	<input type="checkbox"/> Change
MGR	Steven Burns	1100 Park Central Blvd.	<input type="checkbox"/> Add
		Suite 3400	<input type="checkbox"/> Remove
		Pompano Beach, Florida 33069	<input type="checkbox"/> Change
MGR	Jack Cardwell	1100 Park Central Blvd.	<input type="checkbox"/> Add
		Suite 3400	<input type="checkbox"/> Remove
		Pompano Beach, Florida 33069	<input type="checkbox"/> Change
CFO	Richard Cooper	1100 Park Central Blvd.	<input type="checkbox"/> Add
		Suite 3400	<input type="checkbox"/> Remove
		Pompano Beach, Florida 33069	<input type="checkbox"/> Change

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