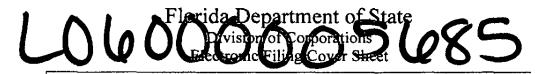
Division of Corporations

Page 1 of 2



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(((H15000307502 3)))



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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CES HOLDINGS, LLC

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COVER LETTER

TO:		stration Se sion of Cor				
CTIDI	IECT:	CES Holdir	ngs, LLC			
30.60	ECI:		Name of Lim	ited Liability Company		
			Amendment and fee(s) are sub	•		
			Michael J. Gasdick			
				Name of Person	.,	
			Gasdick Stanton Early, P.A.	4. .		
				Firm/Company		
			1601 W. Colonial Drive			
				Address		
			Orlando, FL 32804			
				City/State and Zip Code	<u> </u>	
			mick@gse-law.com	to be used for future annua	report notification	on)
For fu	uther inf	ormation co	oncerning this matter, please co			
Mich	act J. Ga	sdick		407 4:	23-5203	
		Name of	Person	Area Code	Daytimo Tele	sphone Number
Enclo	sed is a	check for th	e following amount:			
= \$2	25.00 Fil	ing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is or		□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		MAILI	ING ADDRESS:	STREE	T/COURIER	ADDRESS:

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

(((H15000307502 3)))

(((H15000307502 3)))

ARTICLES OF AMENDMENT (((H15000307502 3))) TO ARTICLES OF ORGANIZATION

CES Holdings, LLC	Med Vickillia Communication	<i>V</i>		
CYMINE OF THE ATTR	(A Florida Limited Liabil	it now appears on our records.) ity Company)		
The Articles of Organization for this Limited Florida document number L06000005685	Liability Company were	e filed on <u>01/17/2006</u>	and assig	ped
This amendment is submitted to amend the fo	llowing:			
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 Co	empany," the designation "LLC" or the abb	reviation "L.L.	C. 7
Enter new principal offices address, if appli	icable:		Ev [9
(Principal office address MUST BE A STREET ADDRESS)			7.5	₽
	_		1 · ·	() Esta
			62	
Enter new mailing address, if applicable:				
(Malling address MAY BE A POST OFFICE	BOX)			<u> </u>
•			<u> </u>	25
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	L'or registered office office address here:		he name of	the new
New Registered Office Address:	1001 W. Colonial Di	Enter Florida street address		
	Orlando	, Florida ³²⁸⁰	14	
		Thy Trongs	Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:		**	
I hereby accept the appointment as registen provisions of all statutes relative to the prop accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complete perfo istered agent as provid registered office addr	ormance of my duties, and I am fai ded for in Chapter 605, F.S. Or, if	miliar with a this docum	and ent is
	If Changing I	Registered Agent, <u>Signature of New Regi</u>	tered 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:

(((H15000307502 3)))

MGR = N AMBR = A	lanager authorized Member	(((H15000307502 3)))	
Title	Name	Address	Type of Action
			□ Add
			□ Remove
			☐ Change
			□ Add
	•		□ Remove
			☐ Change
			Add
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Tective date, if other than an effective date is listed, the date	the date of filing:(o	ptional) after filing.) Pursuant to 605,0207 (3
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