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Fernand Lamothe

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Division of Corporations

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LD6000012213

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

L. SELLERS

JAN 12 2011

From:

Account Name : EUR-AM GROUP CONSULTANTS LLC
Account Number : I200800000C98
Phone : (954) 636-3886
Fax Number : (877) 800-7133

EXAMINER

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

Email Address: _____

RECEIVED
11 JAN 11 PM 12:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
STRATEGEOS LLC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 03 |
| Estimated Charge | \$55.00 |

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 JAN 11 AM 9:59

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Electronic Filing Menu

Corporate Filing Menu

Help

To: Florida DEPARTMENT OF STATE
850-617-6383

Attention:

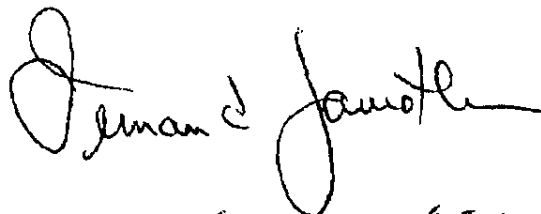
I just fax at 11:41 AM the AMENDED
NAME but I forgot to put the word "FLORIDA"
within the name of ~~THE~~ LLC.

THE NEW NAME IS

" STRATEGEOS Economics FLORIDA LLC "

Thank to take this AMENDED instead the
First one.

Thank you



954-636-3886

11 JAN 11 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

STRATEGEOS 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 02/02/2006 and assigned Florida document number L06000012213.

This amendment is submitted to amend the following:

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

STRATEGEOS ECONOMICS FLORIDA LLC

The new name must be distinguishable and end with 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)

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:

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

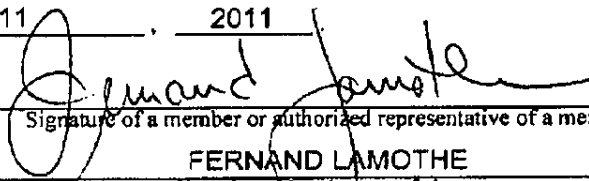
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------|----------------|---------------------------------|
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
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| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated JANUARY 11, 2011


Signature of a member or authorized representative of a member

FERNAND LAMOTHE

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00