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**EXAMINER** 

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# **COVER LETTER**

Division of Co					
SUBJECT:	NC.	T-107, LLC			
	Name of Lim	ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are sul	omitted for filing.			
Please return all corresp	pondence concerning this matter	to the following:			
		Susan Van Deraa			
	National Chr	istian Charitable Found	ation, Inc.		
		Firm/Company			
	Suite 5	Suite 500, 11625 Rainwater Drive			
		Address			
		Alpharetta, GA 30009			
	blavec	City/State and Zip Code blaycock@nationalchristian.com			
	E-mail address: (	to be used for future annual report	notification)		
For further information	concerning this matter, please of	call:			
	san Van Deraa	at ( 678 )	892-1720		
Name	of Person	Area Code & Da	sytime Telephone Number		
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	\$60.00 Filing Fee, Certificate of Status & Osed) Certified Copy (additional copy is enclosed)		

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** 

### NCT-107, LLC

The undersigned, being authorized to execute and file these Articles of Amendment, hereby certifies that NCT-107, LLC, a Florida limited liability company (hereinafter referred to as the "Company") was organized by a filing on August 29, 2006 and these Articles hereby amend a typographical error in the Company's Articles of Organization as follows:

## **ARTICLE I – Name**

The name of the Company is:

NCT-107, LLC

Except as set forth above, the Company's Articles of Organization remain in full force and effect.

IN WITNESS WHEREOF, I have signed these Articles of Amendment and acknowledged them to be my act this \_\_\_\_\_\_ day of December, 2009.

**NCF** Corporation

Signature of Organizer/Authorized Representative of Member

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

William Matthew Lawson

Name of Officer of Organizer/Authorized Representative

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