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(Address)						
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T. HAMPTON

MAR 1 9 2008

EXAMINER

COVER LETTER

	gistration Solition of Col		s	٠,		
SUBJECT:	C182T,	LLC	٠,.			
			(Name of Lim	ited Liability C	ompany)	
			and fee(s) are sub		-	•
Picase retur	n all corresp	ondence conce	ming this matter	to the followin	g:	·
	,	Leah H.	Mayersohn,		\\\\\\	
	•			(Name of I	erson)	
		Law Off	ices of Leah			
				(Firm/Con	npany)	
		1 Finan	cial Plaza, Si			
				(Addre	SS)	
		Fort La	uderdale, FL	33394		
		<u> </u>	•	(City/State and	Zip Code)	
For further	information	concerning thi	s matter, please o	æll:		
Leah Ma	yersohn,	Esq.		at (95	64 ₎ 765-1900	
		of Person)			(Area Code & Daytime	Telephone Number)
Enclosed is			amount: Filing Fee & ficate of Status	Certific	iling Fee & ed Copy onal copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy
	MAII	LING ADDRI	ess:	(STREET/COURIE	(additional copy is enclosed)

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE
DIVISION OF CORPORATIONS

OR MAR 18 AM 11: 35

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

· · · ·	01.05 2 2			
The Articles of Organization for this Limited Liab	ility Company were filed on Septemb	er 27, 2006 and assigned		
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of th	ne limited liability company here:			
Metrix Companies LLC				
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liability Company," th	e designation "LLC" or the abbreviation		
B. If amending the registered agent and/or registered agent and/or the new registered offic	-	cords, enter the name of the new		
Name of New Registered Agent:		,		
New Registered Office Address:				
•	(Enter Florida street address)			
♣ 1 ×1	. 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:

<u>Title</u> <u>Name</u> <u>Address</u> <u>Ty</u>	pe of Action
	Add
	Remove
	Add Remove
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	SECRETARY DIVISION OF C
·	ED STATE SORPORATIONS
Dated March 12 , 2008 .	
Signature of a member or authorized representative of a member	<u> </u>
David Needler, Manager Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00