Division of Corporations

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To:

Division of Corporations -

Fax Number : (850)205-0383

From:

Account Name : JAMES A NOLAN, PA

Account Number : I20020000124

Phone : (904)425-3058 Fax Number : (904)425-3059

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

CORE PAYROLL AUTOMATION, LLC

مثلثات والمراجع
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\$25.00

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COVER LETTER				
TO: Registration Section Division of Corporations				
SUBJECT: Core Payroll Automation, LLC				
(Name of Limited Liability Company)				
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:				
James A. Nolan				
James A. Nolan, P.A. (Firm/Company)				
4114 Herschel Street, Suite 105				
Jacksonville, Florida 32210 (City/State and Zip Code)				
For further information concerning this matter, please call:				
James A. Nolan at (904) 425-3058 (Name of Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
\$25,00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}				

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Core Payroll Automation, LLC

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	(Present Name) (A Florida Limited Liability Company)	 -
first:	The Articles of Organization were filed on December 12, 2006 and assigned document number L06000118285	w.,
SECOND:	This amendment is submitted to amend the following:	
	Article I should be replaced it its entirety and read as follows:	
	The name of the Limited Liability Company is:	
	Core Automation, LLC	<u> </u>
	·	SF 70
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		30 30
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Dated_Ja	nuary 30 2007	ED OF STATE TRESSATIO <b>AM IO: 07</b>
(	Sall in	<b>=</b>
	Signature of a member or authorized representative of a member	. =
	James A. Nolan	

Filing Fee: \$25.00

Typed or printed name of signee