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12/10/08--01012--007 **25.00

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

J. BRYAN
DEC 11 2008
EXAMINER

COVER LETTER

SUBJECT: _Millennium Cable Systems, 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:

Robert Thomas
(Name of Person)

Millennium Cable Systems, LLC
(Firm/Company)

2247 Lake Forest Avenue
(Address)

Springhill, FL 34609
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert Thomas   (C) 352-573-2888
(Name of Person)   (H) at (352) 688-6988
                              (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☑ $25.00 Filing Fee   ☐ $30.00 Filing Fee &   ☐ $55.00 Filing Fee &   ☐ $60.00 Filing Fee,
                            Certificate of Status   Certified Copy   Certificate of Status &
                                                          (additional copy is enclosed)   Certified Copy
                                                                                       (additional copy is enclosed)

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Millennium Cable Systems, 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 ___12/27/06___ and assigned

Florida document number ___L06000122147___

This amendment is submitted to amend the following:

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

_____

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)

2247 Lake Forest Avenue
Springhill, FL 34609

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2247 Lake Forest Avenue
Springhill, FL 34609

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: Robert Thomas

New Registered Office Address: 2247 Lake Forest Avenue

(Enter Florida street address)

Springhill _____, Florida 34609

(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)

Page 1 of 2

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

Title	Name	Address	Type of Action
Mgr	Lisa A. Thomas	837 Bayou View Dr. Brandon, FL 33510	☐ Add ☑ Remove
Mgr	Colin K. Thomas	837 Bayou View Dr. Brandon, FL 33510	☐ Add ☑ Remove
Mgr	Robert Thomas	2247 Lake Forest Avenue Springhill, FL 34609	☑ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

Dated _____ , _____ .

Lisa A. Thomas
Signature of a member or authorized representative of a member

Lisa A. Thomas
Typed or printed name of signee

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Filing Fee: $25.00