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EXAMINER

COVER LETTER

Division of Co					
SUBJECT: Apogee	Ventures, LLC				
	(Name of Lin	nited Liability Company)			
	Amendment and fee(s) are su ondence concerning this matte	-			
	David Wulkopf				
		(Name of Person)			
	Stinson Morrison He				
		(Firm/Company)			
	168 North Meramec	, Suite 400			
		(Address)			
	St. Louis, Missouri	63105		•	
		(City/State and Zip Code)			
For further information of	concerning this matter, please of	call:		2008 HAR SECRETALLAHA	*** []
David Wulkopf		at (314) 863-0800			Carriera Carriera
(Name	of Person)	(Area Code & Daytime	Telephone Number)	R 13 AH 10: 4	
Enclosed is a check for t	he following amount:			08.00 L	•
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Certificate of Certified Co (additional of	of Status &	

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

	Apogee Ventures, LLC			
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on rida Limited Liability Company)	our records.)		
The Articles of Organization for this Limited Liabil Florida document number <u>L07000014478</u>	lity Company were filed on <u>Februa</u>	ry 8, 2007	and assigne	d
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liability company here:			
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company,"	the designation "	LLC" or the abbre	viation
B. If amending the registered agent and/or r registered agent and/or the new registered office		ecords, enter	the name of th	e new
			ZOOO MA SECRE	·Tt
Name of New Registered Agent:			ASA -	- parast
New Registered Office Address:	(Futou I	Florida street aa	ω	
	(Enter 1	. Florida	Idress) R R ST	: ::::::::::::::::::::::::::::::::::::
_	(City)	, Florida	(Zip Code)	
New Registered Agent's Signature, if changing Regis	stered Agent:			
I hereby accept the appointment as registered ag the provisions of all statutes relative to the prope accept the obligations of my position as register being filed to merely reflect a change in the regi company has been notified in writing of this char	er and complete performance of my ed agent as provided for in Chapte stered office address, I hereby con,	y duties, and I er 608, F.S. Or,	am familiar with if this documen	and a
	(If Changing Registered Agent, Si	gnature of New R	egistered 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 Type of Action Title Name <u>Address</u> 11321 Compass Pointe ☐ Add **MGRM** Todd Lewis **√** Remove Et Myers, Florida 33908 Jayme Lewis ☐ Add MGRM 11321 Compass Pointe Ft. Myers, FL 33908 MGR_ Todd Lewis 11321 Compass Pointe ✓Add Ft Myers FL 33908 Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Management of the limited liability company is vested in one or more managers. March 6 2008 Signature of a member or authorized representative of a member David Wulkopf, Esq.

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Typed or printed name of signee

Filing Fee: \$25.00