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D. BRUCE
MAR 2 9 2011
EXAMINER

			COVER LETTER		
	gistration S tision of Co	Section Imporations			
SUBJECT:		MARST	AUSINT AGE	ncy, ii	\subset
		Name of Lif	nited Liability Company		
The enclosed	i Articles o	f Amendment and fee(s) are s	ubraited for filing.		
Please return	all corresp	ondence concerning this matte	er to the following:		
		WEN	74		
		i i	Name of Person		
	is a light Particles	त्रकेती एडटा ४८३ वर ४५ ५७२३ १ वर्डी द्वार्थित संस्थाता	Ms. Wendy Kay 19 19 19 19 19 19 19 19 19 19 19 19 19	CN 181 84	11 MAR SECRET
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			City/State and Zip Code VT CP A GREAT (to be used for future agrees: report notified	LOM Harris	128 AM 1/2- L9 TARY OF STATE ASSEE, FLORIDA
For further m	ifornialis " s	oncerning this matter, please	·	· ;	9 OA
	1E12	KAY	at (914) 319 Area Code & Dayrige	9995	
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\$25 00 Fil	ling Foe	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of S Certificate Of S Certified Copy (additional cop	Status & V

	Regists Divisio P.O. Bi	nthen Section	Regustration Section Division of Corporate Clifton Building 2661 Frecutive Cent Tallahassee, FL 3230	ions er Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARS THEN	1 HEENLY	LLC	
	pany as k now appears on our Liability Company)	records.)	
The Articles of Organization for this Limited Liability Compar Florida document munber <u>LOJOOO31168</u>		2/2007 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lie	ability company here:		
The new name must be distinguishable and end with the words "Lir"L.L.C."	mited Liability Company," the	designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	***	हुई हैं ग	
		88 XXXX	
		The Em	
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX		ATE ATE	
B. If amending the registered agent and/or registered of ceriatered agent and/or the new registered office address he		rds, enter the pame of the new	
Name of New Registered Agent:	in the little contract of the		
New Registered Office Address:			
	Enter Florida street address		
the state of the s		, 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 hereby to the limited liability.

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
MERM	WENDY KAY	741 SEAVIEW PR	Add
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California i Anna da dipula accura			AddRemove
	· more required and resident of the second o		Add Remove
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D. If amendin	g any other information, enter change(s)	here: (Attach additional sheets, if necessary.)	FIL 11 MAR 28 PALLAHASSEE
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