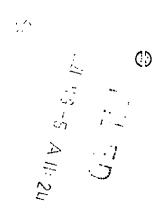
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| (Re | questor's Name) | | | |
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| PICK-UP | MAIT | MAIL | | |
| (Bu | siness Entity Name | e) | | |
| (Do | cument Number) | ···· | | |
| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
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| | Office Use Only | \ / / | | |
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| MEBRIDE Kelly& Associate | 5 (| $\angle \subset$ |
|--|--------------------|------------------|
| (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 $\frac{APII/2,20}{2000348/0}$ | <u>⊘</u> 2 and ass | signed |
| 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 contain the words "Limited Liability Company," the designation "LLC" or the above the contain the words "Limited Liability Company," the designation "LLC" or the above the contain the words "Limited Liability Company," the designation "LLC" or the above the contain the words "Limited Liability Company," the designation "LLC" or the above the contain the words "Limited Liability Company," the designation "LLC" or the above the contain the words "Limited Liability Company," the designation "LLC" or the above the contain the words "Limited Liability Company," the designation "LLC" or the above the contain the words "Limited Liability Company," the designation "LLC" or the above the contain the words "Limited Liability Company," the designation of the contain the contain the words "Limited Liability Company," the designation of the contain the words "Limited Liability Company," the designation of the contain the con | obreviation "L | .L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDRESS) | | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| B. If amending the registered agent and/or registered office address on our records, enter the namagent and/or the new registered office address here: | e of the nev | w registered |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | <u>(</u>) |
| Enter Florida street address | -: | |
| Florida | 9:10.1 | |
| New Registered Agent's Signature, if changing Registered Agent: | Zip Code | • •• |
| new Registered Agent's Signature, it 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 605, 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|---------------------|-------------------------------------|--------------------|
| AMBR | Allstar Service LLC | - 770 Lumwary arcle | DAdd |
| | ₹ | # 102 Helboune 4-32% | Remove |
| 1.102 | | | □Change |
| AMBR —— | BriAn McBile | 326 S Hyde Park #A TAMPO H. 3360 | □Add |
| | | TAMPE H. 3360 | Remove |
| 1112 | D. 25 7 7 | | □Change |
| M68 — | Prago JARGEC | 770 Commony Circle | □Add |
| | | 770 Coming Circle | Romove |
| 022 | | | Change |
| MACSK — | Brita McBuch | 326 S Hyde TAN | € Add |
| | 7 | 326 S Hyde PANG TAMP H33606 | Remove |
| | | | င်း Change- |
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| D. If amending any other information, enter change(s) here: (Attach | additional sheets, if necessary.) |
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| E. Effective date, if other than the date of filling: (If an effective date is listed, the date must be specific and cannot be prior to date of fill Note: If the date inserted in this block does not meet the applicable statute document's effective date on the Department of State's records. | (optional) ling or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) ory filing requirements, this date will not be listed as the |
| If the record specifies a delayed effective date, but not an effective time, at 12:0 record is filed. |) a.m. on the earlier of: (b) The 90th day after the |
| Dated Tuy 30 Zozl. | |
| + P3 | |
| Signature of a member or authorized repres | |
| Brian Klasus | |

Filing Fee: \$25.00