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SECRETARY OF STATE
WHASSEE, FLORIDA

N. O-Common FEB 11 2000

COVER LETTER

Division of Co	erporations						
SUBJECT:	E Group	Funding, LLC					
50,000		ted Liability Company					
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.					
Please return all corresp	condence concerning this matter	to the following:					
		Eduardo Gomez					
		Name of Person					
	Firm/Company						
	9600 S. Ocean Dr # 301						
	lana	Address					
	Jens	en Beach, Florida, 34957 City/State and Zip Code					
	eduardogomezrojas@yahoo.com E-mail address: (to be used for future annual report notification)						
For further information	concerning this matter, please of	all:					
Eduardo Gomez Name of Person		at (501)	765-2609 ne Telephone Number				
Name	or i cison	Alea Code de Dayan	ne receptione (value)				
Enclosed is a check for	the following amount:						
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
Regis	LING ADDRESS: stration Section ion of Corporations	STREET/COUR Registration Secti Division of Corpo	JER ADDRESS:				

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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· F	Group Fun	ndina II C	Si	EURETARY OF STATE LLAHASSEE, FLORIDA	
(Name of the Limited L (A F	iability Compan lorida Limited Li	y as it now appe ability Company	ars on our records.)	LLANASSEE, FLORIDA	
The Articles of Organization for this Limited Liab Florida document numberL07000752		were filed on	August 10, 200	and assigned	
This amendment is submitted to amend the follow	ring:				
A. If amending name, enter the new name of t	he limited liabi	lity company h	ere:		
	Design Strate	egy LLC			
The new name must be distinguishable and end with "L.L.C."	the words "Limit	ed Liability Com	pany," the designation	"LLC" or the abbreviation	
Enter new principal offices address, if applicab	ole:	9600 S. Oc	ean Dr # 301		
(Principal office address MUST BE A STREET ADDRESS)		Jensen Beach, Florida, 34957			
		The second secon	, , , , , , , , , , , , , , , , , , , 		
Enter new mailing address, if applicable:		9600 S. Ocean Dr # 301			
(Mailing address MAY BE A POST OFFICE BOX)		Jensen Beach Florida, 34957			
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent: New Registered Office Address:	_	: an Dr # 301			
	Enter Florida street address				
Je		sen Beach	, 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 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 the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Ma MGRM = M	inager Managing Member				
<u>Title</u>	Name	Address	Type of Action		
			Add Remove		
			Add Remove		
			— n		
	***************************************		Parracia		
			=,		
D. If amen	ding any other information, en	ter change(s) here: (Attach additional sheets, if ne	FILED 10 FEB 10 PH 12: 46 SECKE LARY OF STATE FALL AHASSEE, FLORIDA ces		
Dated	February 4	, <u>2010</u> .			
	Signature o	f a member or authorized representative of a member			
	J.B.I.LIII V	Eduardo Gomez			
Typed or printed name of signee					

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Filing Fee: \$25.00