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SECRETARY OF STATE
SECRETARY OF STATE

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COVER LETTER

Division of Corporations		
SUBJECT: TDH CAPITAL GROUP, LLC		
	ited Liability Company)	
The enclosed Articles of Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondence concerning this matter	-	
rease return an correspondence concerning this matter	to the following.	
MICHAEL C. ZARI		
MOTIVEE O. 2 W.	(Name of Person)	
TDH CAPITAL GROU	UP H.C	
TOTI ON TIME GROW	(Firm/Company)	
122 WESTCHESTER	DONE STED	
132 WESTCHESTER	(Address)	
	_	
MADISON, AL 3575	(City/State and Zip Code)	
For further information concerning this matter, please ca	all:	
MICHAEL C. ZARI	at (256) 325-6500	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
\$30.00 Filing Fee &	\$55.00 Filing Fee &	\$60.00 Filing Fee,
Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
		(additional copy is enclosed)
MAILING ADDRESS:	STREET/COURIER ADDRESS:	

Registration Section Section Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section

TO:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TDH CAPITAL GROUP, LLC

company has been notified in writing of this change.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

(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 <u>AUGUST 29, 2007</u> and assigned Florida document number <u>L07000088761</u> .
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."
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: New Registered Office Address:
(Enter Florida street address)
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
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

(If Changing Registered Agent, Signature of New Registered Agent)

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 = Manager

MGRM = Managing Member **Title** <u>Name</u> **Address Type of Action MGRM** 830 Symphony Isles Blvd **BOBBY ANDERSON** ☐ Add Apollo Beach, FL 33572 **√** Remove MGRM ANDERSON HOME CONSTRUCTION INC ✓ Add 830 Symphony Isles Blvd Apollo Beach, FL 33572 ☐ Remove Remove Remove □Add Remove \neg Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated MARCH 10 2008 Signature of a member or authorized representative of a member MICHAEL C. ZARI Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00