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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address: _____

2010 DEC -3 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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10 DEC -3 PM 12:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CSI OF FL MANAGEMENT COMPANY, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

J. SAULSBY
EXAMINER

DEC 6 2010

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CSI OF FL MANAGEMENT COMPANY, LLC

(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 December 10, 2007 and assigned
Florida document number L07000122422

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

VICTORY COMMUNICATIONS I, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "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)

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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, Florida 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 Changing Registered Agent, Signature of New Registered 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

Title	Name	Address	Type of Action
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated November 19, 2010

SIGNATURE ON NEXT PAGE

Signature of a member or authorized representative of a member

Timothy M. Victory

Typed or printed name of signer

Page 2 of 2

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CSI OF FL MANAGEMENT COMPANY, LLC,
a Florida limited liability company

By: Communications Services Holding Company, LLC,
a Florida limited liability company, Sole Member and
Manager

By: Communication Services, Inc.,
a Nevada corporation,
Sole Member and Manager

By: Timothy Victory
Timothy Victory, President

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