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COVER LETTER

TO: Registration S Division of Co		•	
SUBJECT:	MTimb	erbrook, LLC	
	······································	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	7
	Marc E. Strauss Name of Person		12 HA 1. CH
			· · · · · · · · · · · · · · · · · · ·
MTimberbrook, LLC Firm/Company			
*		Timi Company	
3200 V		200 Westminster Drive	
		Address	
	В	oca Raton, FL 33496	
		City/State and Zip Code	
	E-mail address: (auss@marcusmillichap.cc	ification)
For further information	concerning this matter, please c	all:	
Ma	arc E. Strauss	at (954)	245-3500
	of Person		me Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee &	\$55.00 Filing Fee &	\$60.00 Filing Fee,
V 02 23.00 1 m m g 1 00	Certificate of Status	Certified Copy (additional copy is enclose	Certificate of Status &
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Regis Divisi P.O. I	LING ADDRESS: tration Section on of Corporations Box 6327 nassee, FL 32314	STREET/COUF Registration Sect Division of Corp Clifton Building 2661 Executive C Tallahassee, FL 3	orations Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

N	MTimberbrook, LLC		
(Name of the Limited Li (A F)	ability Company as it now appeorida Limited Liability Company	ears on our records.)	2
The Articles of Organization for this Limited Liab Florida document number		December 20, 2007	and assigned
This amendment is submitted to amend the follow	ing:		
A. If amending name, <u>enter the new name of th</u>	e limited liability company h	ere:	
	Pro Interviews, LLC		
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Com	pany," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicab	le:		
(Principal office address MUST BE A STREET A	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered offic		our records, enter the	e name of the new
Name of New Registered Agent:			· <u>···</u>
New Registered Office Address:		Enter Florida street addre	
	ETHET TUTTING SITES AND ESS		
	Citv	, 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, <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 **Address** Type of Action Name Max S. Strauss MGRM ✓ Add 3200 Westminster Drive Boca Raton, FL 33496 Remove Marc E. Strauss MGRM 3200 Westminster Drive Boca Raton, FL 33496 ✓ Add Remove ☐ Add Remove \prod Add Remove \Box Add □ Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) May 18 2012 Dated ___ Signature of a member or authorized representative of a member Marc E. Strauss Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00