Office Use Only

G. MCLEOD

MAR 26 2009

ENWINER



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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT:	cesare Expo	ed Liability Company)	<u> </u>	
The enclosed Articles of Ar	nendment and fee(s) are subm	nitted for filing.		
Please return all correspond	lence concerning this matter to	the following:		
	Brad	(Name of Person)	u son	
		(Firm/Company)		
	5900 My	(Address)		
	Foot Pi	(Address) e.c. c.e. F.L. 36 (City/State and Zip Code)	1982	
For further information con-	cerning this matter, please cal	l:		
Bradley a	W. Uiamson Person)	at (<u>56/) 572 - 7</u> (Area Code & Daytime Te	2186 Elephone Number)	
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 enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

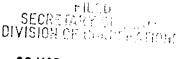
MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



09 MAR 25 PM 1: 17

Treasure Ex	eseditions LLC
(<u>Name of the Limited Liab</u> (A Flori	da Limited Liability Company)
	ry Company were filed on January 2008 and assigned
This amendment is submitted to amend the following	3:
A. If amending name, enter the new name of the	limited liability company here:
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET AD	DDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	2
B. If amending the registered agent and/or re registered agent and/or the new registered office a	gistered office address on our records, enter the name of the new address here:
Name of New Registered Agent:	
New Registered Office Address:	(Enter Florida street address)
-	(City), Florida (Zin 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member Address Type of Action <u>Title</u> <u>Name</u> MGR Jeff Moore 8075 Evergreen land Add
Liberty Township OH R Remove _☐ Add ☐ Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated March 23, 2009.

Signature of a member or authorized representative of a member

Bradley Williamson

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00