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T. HAMPTON
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EXAMINER

COVER LETTER

TO: Registration Sect Division of Corpo					
SUBJECT: WILLIAM	IS + NG HOLDING (Name of Lim	SS, LLC ited Liability Company)			
The enclosed Articles of Ar	nendment and fee(s) are sub	omitted for filing.			
Please return all correspond	lence concerning this matter	to the following:			
	Graham W. Syfert, Esq.				
		(Name of Person)			
	Affinity Law Firm, P.L.				
		(Firm/Company)			
3947 Boulevard Center Dr Ste 101					
					
	Jacksonville, FL 32207				
		(City/State and Zip Code)			
For further information con	cerning this matter, please c	all:			
Graham W. Syfert, Esq.		at (904) 398-9510			
(Name of	Person)	(Area Code & Daytime T	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 OF

SECRETARY OF STATE ON VISION OF CORPORATIONS

WILLIAMS + NG HOLDINGS, 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 02/21/2008	and assigned	
Florida document number L08000018953			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
WILLIAMS & NG HOLDINGS, LLC			
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the des	signation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	3303 Cerri	tos Ave.	
(Principal office address MUST BE A STREET ADDRESS)	Signal Hill, (tos Ave. 2A 90755	
Enter new mailing address, if applicable:	3303 Cerrit	tos Ave. CA 90755	
(Mailing address MAY BE A POST OFFICE BOX)	Signal Hill,	CA 90755	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		s, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
		lorida	
	(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 = Mana MGRM = Ma	iger ` naging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendin	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	
			SECRETARY OF SECRETARY OF CORP
Dated January	, 2009	·	ED OF STATE IRPORATIONS PM 12: 05
<	-	or authorized representative of a member	
_	Graham W. Syfert Typed o	r printed name of signee	

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Filing Fee: \$25.00