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SECRETARY OF STATE
TALLAHASSEE, FLORID.

D. BRUCE
APR 1 1 2008

EXAMINER

COVER LETTER

TO: Registration Division of C	Section Corporations	•	
SUBJECT: 7	M3 ENTERPRIS	SES LLC	
		mited Liability Company)	
	of Amendment and fee(s) are su	<u>-</u>	
Please return all corre	spondence concerning this matte	er to the following:	
	MICHELL	E VAN DYK (Name of Person)	
		ENTERPRISES LLC (Firm/Company)	
	<u>811 E</u>	HILLSBORD BLVD, ST (Address)	E 205
	DEERFIELD	REACH, FL 33441 (City/State and Zip Code)	
		(City/State and Zip Code)	SECRETAN CHARACTER
For further information	n concerning this matter, please	call:	NAME OF STREET
MICHELLE	VAN DYK	at (310) 890 4	663 3 3 17
(Nar	ne of Person)	### REACH FC 33441 (City/State and Zip Code) call:	elephone Number)
Enclosed is a check for	or the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg Div P.O	ILING ADDRESS: istration Section ision of Corporations . Box 6327	STREET/COURIER Registration Section Division of Corporation Clifton Building	ns
Tallahassee, FL 32314		2661 Executive Center	Circie

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TM3 ENTER P (Name of the Limited Liability) (A Florid	PRISES LLC ility Company as it now appears on ou da Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liability Florida document number <u>L 08000019378</u>	y Company were filed on $2/22$	08 and assigned
This amendment is submitted to amend the following	g	
A. If amending name, enter the new name of the l	imited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the	e designation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office a Name of New Registered Agent: New Registered Office Address:	ddress here:	cords, enter the name of the new TALLAHAS PR Prida street address) Florida 2 (7) Code
· —	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered age the provisions of all statutes relative to the proper accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this change	ent and agree to act in this capacity r and complete performance of my d d agent as provided for in Chapter tered office address, I hereby confir	duties, and I am familiar with and 608, F.S. Or, if this document is

(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 **Type of Action** Title <u>Name</u> Address SHAHRIAR SEOGHI MGRM X Add ☐ Remove SHAHRIAR SEOGHI CHILDRENS TRUST MGRM 🔀 Add Remove Add Remove □Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) APRIL 2008 Signature of a member or authorized representative of a member MICHEUE VAN Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00