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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : M. BURR KEIM COMPANY

Account Number: I19990000242 Phone : (215) 563-8113 : (215)977-9386 Fax Number

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

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EXAMINER

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M. BURR KEIM COMPANY

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	OX LLC	
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	y were filed on February 28, 2008	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and end with the words "Lim"L.L.C."	nited Liability Company," the designation "Ll	_C" or the abbreviation
Enter new principal offices address, if applicable:	2540 Haif Moon Walk	
(Principal office address MUST BE A STREET ADDRESS)	Naples, FL 34102	
	<u></u>	09 SEE
Enter new mailing address, if applicable:	2540 Half Moon Walk	NOV I
(Mailing address MAY BE A POST OFFICE BOX)	Naples, FL 34102	THE
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address ber	ffice address on our records, <u>enter th</u> re:	ORA SO D
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	:\$5
	, Florida	
Non-Province LA A CO	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 Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

Type of Action

M. BURR KEIM COMPANY

(((H090002428193)))

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:

Address

MGR = Manager MGRM = Managing Member

Name

<u>Title</u>

	/	iber or authorized representative of a member Foxhoven, Managing Member	
Dated	October 30th	2009	AM 8: 24 OF STATE E. FLORIDA
 			O9 NOV 17 AM SECRETARY OF S ALLAHASSEE, FL
D. If amen	(See attached rider) ding any other information, enter cha	ange(s) here: (Attach additional sheets, if necessor	7
VP	Craig A. Foxhoven, Jr.	2540 Half Moon Walk Naples, FL 34102	
<u>VP</u>	Craig A. Foxhoven, Jr.	1045 First Ave Suite 120 King of Prussia, PA 19406	Add Remove
DT	Rebecca D. Foxhoven	2540 Half Moon Walk Naples, FL 34102	✓ Add Remove
<u>DT</u> .	Rebecca D. Foxhoven	1045 First Ave., Suite 120 King of Prussia, PA 19406	Add [7] Remove
MGRM	Craig A. Foxhoven	2540 Half Moon Walk Naples, FL 34102	Add Remove
MGRM	Craig A. Foxhoven	1045 First Ave., Sulte 120 King of Prussia, PA 19406	Add Remove

Filing Fee: \$25.00

M. BURR KEIM COMPANY

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Rider to The Articles of Organization

o£

STARFOX LLC

S (Remove)

Paul M. Foxhoven

1045 First Ave. Suite 120

King of Prussia, PA 19406

S (Add) Paul M. Foxhoven 2540 Half Moon Walk Naples, FL 34102

PILED

09 NOV 17 AM 8: 24

SECRETARY OF STATE TALLAHASSEE, FLORIDA