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EXAMINER



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08 APR -2 PM 12: 24

COVER LETTER

TO: Registration Division of	Section , , Corporations	• ,	•
SUBJECT. MAKO	SECURITIES, LLC		
SUBJECT:		nited Liability Company)	
The enclosed Articles	of Amendment and fee(s) are sul	omitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	JENNIFER L. STRIC		
		(Name of Person)	
	PERRY & KERN, P.	A.	
		(Firm/Company)	· · · · · · · · · · · · · · · · · · ·
	50 SE FOURTH AVI		
		(Address)	
	DELRAY BEACH, F	LORIDA 33483	
		(City/State and Zip Code)	
For further information	on concerning this matter, please o	eall:	
JENNIFER L. S		at (561) 276-4146	
(Nai	me of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for	or the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

08 APR -2 PM 12: 24

MAKO SECURITIES, LLC	"'- G		
(Name of the Limited List (A Flor	oility Company as it now appears or ida Limited Liability Company)	our recorus.	
The Articles of Organization for this Limited Liabili	ity Company were filed on March	13, 2008 and assigned	
Florida document number <u>L08000026553</u>			
This amendment is submitted to amend the followin	g: 		
A. If amending name, enter the new name of the	limited liability company here:		
MAKO SECURITY, LLC			
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company,"	'the designation "LLC" or the abbreviation	
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent: New Registered Office Address:	address here:		
	(Enter Florida street address)		
_		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agenthe provisions of all statutes relative to the prope	ent and agree to act in this capa		
accept the obligations of my position as registere being filed to merely reflect a change in the register company has been notified in writing of this chain	ed agent as provided for in Chap stered office address, I hereby co	ter 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 = Mai MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			F7 n
			P
			Add Remove
			F 10
			C_10
			Remove
D. If amend	ding any other information, ente	r change(s) here: (Attach additional sheets, if n	ecessary.)
Dated Marc	Mile In	2008	
	-	member or authorized representative of a member	
	MICHAEL LAYMON	Typed or printed name of signee	

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Filing Fee: \$25.00