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COVER LETTER

TO: Registration Section . Division of Corporations
SUBJECT: PALMENTO RESEARCH LLC (Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
TEFF CO. GONZASEZ, HS (Name of Person)
Palletto RESEARCH, CLC (Firm/Company)
(Finite Company)
2140 W 68 STREET # 305 (Address)
City/State and Zip Code)
For further information concerning this matter, please call:
Name of Person) (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status \$55.00 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 ARTICLES OF ORGANIZATION **OF**

PALMETY	10 RE	SEAC	HLLC	4	•	
(Name of the Limited Liability Comp (A Florida Limited	any as it now	appears on o				
		10.	•// • • •			
The Articles of Organization for this Limited Liability Compar	ny were filed	on Mari	H 20,2	<i>008</i> and a	ssigned	
Florida document number <u>L 08000028940</u>						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited lia	ability compa	ny here:				
PALMETTO RESEA	RCH	LLC				
The new name must be distinguishable and end with the words "Lir" L.L.C."	mited Liabifity	Company," th	ne designation "	LLC" or the	abbreviation	
Enter new principal offices address, if applicable:		•	Turketi yazı			
(Principal office address MUST BE A STREET ADDRESS)	. <u>.</u> .			9	S	
				<u> </u>	<u> </u>	
•				<u>'</u>	위로뉴	
Enter new mailing address, if applicable:				E.	87E	
(Mailing address MAY BE A POST OFFICE BOX)						
	•			±.		
	<u> </u>			ليب	2	
B. If amending the registered agent and/or registered		ss on our re	ecords, <u>enter</u>	the name	of the ne	
registered agent and/or the new registered office address he	ere:					
Name of New Registered Agent:		·				
New Registered Office Address:	· 	•	·			
•	(Enter Florida street address)					
<u> </u>			, Florida			
	(City)	•		(Zip Co	ode)	

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)

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
	· · · · · · · · · · · · · · · · · · ·		Add Remove
			Remove
-		•	Add Remove
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	· .		Add Remove
D. If ame	nding any other information, enter chan	age(s) here: (Attach additional sheets, if necessary.	· ·
	-		
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-			+
Dated	2/16/	8 1/ H - 1	 .
	Signature of Amerik	er or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00