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2009 MAY -9 P 3: 50 SECRETARY OF STATE ALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Crystal		Reader LLC ited Liability Company)	>	
The enclosed Articles of Amendme	nt and fee(s) are sub	mitted for filing.		30
Please return all correspondence co	ncerning this matter	to the following:		•
	M 660		TALLAR TALLAR	N.
		(Name of Person)	HAY -9 CRETAR LAHASS	
		(P) (C)	*** *********************************	
		(Firm/Company)	P 3: 50	
43	24 5 M	agnolia cif	TE AND A	
Del		(City/State and Zip Code)	**	
For further information concerning	this matter, please ca	all:		
Todd Mark (Name of Person)	<u>s</u>	at (56) 860 - 7	7190 'elephone Number)	
Enclosed is a check for the followin	g amount:			
	0 Filing Fee & rtificate 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)	ed)

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

Crystal Psycl	nic Reader LLC
(Name of the Limited Ligh	ility Company as it now appears on our records.) ida Limited Liability Company)
The Articles of Organization for this Limited Liabilit	ty Company were filed on April 23, 2008 and assigned 35.
This amendment is submitted to amend the following	3 :
A. If amending name, enter the new name of the	limited liability company here:
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 re registered agent and/or the new registered office a Name of New Registered Agent:	gistered office address on our records, enter the name of the new address here:
New Registered Office Address:	AND
	(Enter Florida sireet addross) Florida, U (City) (City) (City) (City) (City)
New Registered Agent's Signature, if changing Regist	ered Agent:
the provisions of all statutes relative to the proper accept the obligations of my position as registered	ent and agree to act in this capacity. I further agree to comply with r and complete performance of my duties, and I am familiar with and d agent as provided for in Chapter 608, F.S. Or, if this document is tered office address, I hereby confirm that the limited liability ge.

(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 <u>Title</u> <u>Name</u> Type of Action <u>Address</u> Todd Marks Crystal Miller Remove Remove Add Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary Dated_ Signature of a member or authorized representative of a member Todd Marks Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00