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(Re	equestor's Name)			
(Ac	ldress)			
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
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(Do	ocument Number)			
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MECHETARY OF STATES

N. Guilligan MAR 16 2012

COVER LETTER

TO:	Registration Se Division of Cor	ction porations				
SUBJECT: Pinellas		Pinellas	Hosting, LLC			
			ed Liability Company			
The er	aclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspo	ndence concerning this matter	to the following:			
	Name of Person					
Pinellas Hosting, LLC						
Firm/Company						
3665 East Bay Dr. #204, Box25						
Address						
Largo, FL 33771						
	City/State and Zip Code					
	barry.stetler@kjmanagedsolutions.com E-mail address: (to be used for future annual report notification)					
For fu	rther information co	oncerning this matter, please ca	•	,		
William Stetler			at (727) 46 Area Code & Daytime T	88-5963		
	ivanie o	i r eison	Area Code & Dayune	elephone Number		
Enclos	sed is a check for th	e following amount:				
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate 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)		

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: 12 MAR 15 AMII: 57

Pinellas Ho	sting, LLC	拉拉斯	TARY OF STATE
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appea Liability Company)	ers on our records.) Chief	TARY OF STATE ASSEE, FLORIDA
The Articles of Organization for this Limited Liability Company	were filed on	May 22, 2008	and assigned
Florida document numberL08000051691			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company he	<u>re</u> :	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Comp	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	3665 East Bay Dr. #204, Box 25		
(Principal office address MUST BE A STREET ADDRESS)	Largo, FL 33	771	
Enter new mailing address, if applicable:	3665 East Ba	ay Dr. #204, Box 25	5
(Mailing address MAY BE A POST OFFICE BOX)	Largo, FL 33771		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, enter th	ne name of the new
Name of New Registered Agent:			
New Registered Office Address:	F.	nter Florida street addr	055
	City	, Florida	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

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 Title Name **Address Type of Action** ☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Add Remove Remove \prod Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) March 14 2012 Dated Signature of a member or authorized representative of a member William Stetler Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00