Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PETER J. JAENSCH, P.A.

Account Number: 105065002440 : (941)366-9841 Phone : (941)951-0677 Fax Number

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KAUFMANN SERVICES, LLC

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T. HAMPTON

JUL 1 5 2008

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07/14/2008 NON 10:59 FAX 941 951 0677 Main (((HO800017934

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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08 JUL 14 AM-8: 35

SECKETARY OF STATE
ALLAHASSEE, FLORIDA

KAUFMANN SERVICES, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

08/12/2008

The Articles of Organization for this Lumited Liability	ty Company were filed on or the	and assigned
Florida document number L08000058074	······································	
This amendment is submitted to amend the following	g:	
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	y," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	<u> </u>	
Principal office address MUST BE A STREET AI	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	2	
B. If amending the registered agent and/or re registered agent and/or the new registered office:		r records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Ente	er Florida street address)
	(City)	, Florida(Zip Code)
	(~~~	124 000

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)

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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
<u>P.</u>	Lothar Kaufmann	2198 Main Street Sarasota FL 34237	Add Remove
P.	Falk Pitz	Gartenstr. 4 Wetzlar. 35581 Germany 49-6441-77-80-4	Add Remove
			Add Remove
	<u> </u>		Add Remove
			AddRemove
			Add Remove
D. If amendii 	ng any other information, enter o	. change(s) here: (Attach additional sheets, if neces	sary.)
			SECRE TALLAR
			FILE IL 14 IASSEE, IASSEE,
Dated July 14	<u> </u>	S.A. Mall	AN 8: 35 FLORIDA
-	Signature of a m	ember or authorized representative of a member	
-		STEVEN A. CULAIDEATH Typed or printed name of signee	····

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