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T. CLINE
JUL - 8 2008
EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp					
SUBJECT: Webme	ister, LLC				
	(Name of Lim	ited Liability Company)			
·					
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspon	ndence concerning this matter	to the following:			
	Justin Dennis	(Name of Person)			
		(Name of Ferson)			
•		(Firm/Company)			
		(i iniv Company)			
	PO Box 1784				
		(Address)			
	Ponte Vedra Beach, FL 32004			强化 篇	
		(City/State and Zip Code)			
For further information or	oncerning this matter, please c	all·			I annual
To farmer mornation ec	meering in a matter, prease e	utt.		SET P	YT
Justin Dennis		at (904) 476-9147	 	F.F	Epideril H _i Lha
(Name o	f Person)	(Area Code & Daytime Te	lephone Number)	第二	
Enclosed is a check for th	e following amount:				
☑ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Certificate o Certified Co (additional c	of Status &	

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

Webmeister, LLC				
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our	records.)		
· ·	Diaomity Company)			
The Articles of Organization for this Limited Liability Company	were filed on 06/26/200	ond assigned		
Florida document number L08000062720				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	bility company here:			
Azimut 39, LLC				
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the o	designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	unchanged			
(Principal office address MUST BE A STREET ADDRESS)				
*				
Enter new mailing address, if applicable:	unchanged			
(Mailing address MAY BE A POST OFFICE BOX)				
		CHI I		
B. If amending the registered agent and/or registered of		rds, enter the name of the new		
registered agent and/or the new registered office address her	<u>re</u> :			
Name of New Registered Agent:				
New Registered Office Address:		·		
	(Enter Florida street address)			
		, Florida		
	(City)	(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

MGR = Ma $MGRM = N$	nager Ianaging Member	,	
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Addi Remove
	· 		Add -
D. If ameno	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary	
_			,
_			<u> </u>
Dated June	30 , 2008	<u>. </u>	
		er or authorized representative of a member	
	Derrick S. Dennis, Men Type	nber d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00