LOCCCO 63591

(Requ	uestor's Name)	
(Addr	ess)	,
(Addr	ess)	
(City/	State/Zip/Phone #	F)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Name)
(Docu	ıment Number)	
Certified Copies	Certificates o	f Status
Special Instructions to Fil	ling Officer:	

EXAMINER

L. SELLERS

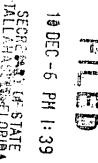
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COVER LETTER

TO: Re Div	istration Section sion of Corporations		
SUBJECT:	PERFORMANCE DATA LLC		
oobone.	Name of Limited Liability Company		
The enclose	Articles of Amendment and fee(s) are submitted for filing.		
Please returi	all correspondence concerning this matter to the following:		
	JENNIE BORDEAUX Name of Person		
	Name of Ferson		
	BORDEAUX & COMPANY, CPA, PA		
	Firm/Company		
2702 ELEANOR WAY			
	Address		
	WEST PALM BEACH, FL 33414		
	City/State and Zip Code		
	JENNIE@BORDEAUXCPA.COM		
	E-mail address: (to be used for future annual report notification)		
For further is	formation concerning this matter, please call:		
	JENNIE BORDEAUX at (561) 792-6534		
	Name of Person Area Code & Daytime Telephone Number		
Enclosed is a	check for the following amount:		
\$25.00 F	ing Fee \$\sum \subseteq \sum \sum \sum \sum \sum \sum \sum \sum		
William Art	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PERFORMANCE DATA LLC

(Name of the Limited Liability Compa (A Florida Limited I			
The Articles of Organization for this Limited Liability Company Florida document number L08000063591	were filed on	6/30/08	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company her	<u>e</u> :	
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Compa	ny," the designation "L	LLC" or the abbreviation
Enter new principal offices address, if applicable:	2000 PALM E	BEACH LAKES BI	LVD.
(Principal office address MUST BE A STREET ADDRESS)	CONCOURS	E TOWER 1, SUI	TE 901
	WEST PALM	BEACH, FL 334	09
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:	<u>e</u> : Ent	er Florida street add	SECNE 34 0 5 5 TAI
	City		^m Zip C ode

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MIGRIM = M	anaging Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	STEVE BLACKBURN	2000 PALM BEACH LAKES BLVD. CONCOURSE TOWER 1. STE 901 WEST PALM BEACH, FL 33409	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendi	ing any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
		·	
			
	· · · · · · · · · · · · · · · · · · ·		
Dated	An The	>	
-		or authorized representative of a member VE BLACKBURN	
•		or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00