L08000092495

How Hors	2 SU 10 1/3	149tDv
(City	//State/Zip/Phone	e #)
PłCK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
,	•	•
(Doe	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
		,
	Office Use On	·



800136845788

10/13/08--01016--001 **30.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(A Florida Limited	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>LOSOOOO92L</u> 9	were filed on <u>Sept - 30 - 0</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
24-7 CUSTOMER CARE The new name must be distinguishable and end with the words "Lin "L.L.C."	ited Liability Company," the designation "	10-0263 569 LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
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 he		the name of the new
Name of New Registered Agent:	/	<u> </u>
New Registered Office Address:		
	(Enter Florida street ad	idress)
	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>	

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 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

MGRM = Managing Member **Type of Action Address** Title Name ☐ Add Remove ☐ Add Remove 🗂 Add Remove ☐ Add Remove ☐ Add Remove 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 Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00