Ø 001/004

Florida Department of State

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From:

Account Name : MCDONALD HOPKINS CO., PA

Account Number : 120050000183 Phone

: (561)472-7510

Fax Number

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

MLY CONSULTING, LLC

Certificate of Status	0
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J. BRYAN

AUG 27 2009

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COVER LETTER

TO: Registration Se Division of Con			
SUBJECT:	MLY CON	NSULTING, LLC	
		ted Liability Company	
The enclosed Articles of	'Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	SEI SEI
		Jaimie Paul	ARET
		Name of Person	
	Мо	Donald Hopkins, LLC	09 AUG 26 AM 8: 17 SECRETARY OF STATI ALLAHASSEE, FLORI
		Firm/Company	To a
		• •	ORI :-
	505	S S. Flagler Drive, #300	Ĝu →
		Address	
	West F	Palm Beach, Florida 33401	
	•	City/State and Zip Code	
	jpaulo	@mcdonaldhopkins.com	
	E-mail address: (to be used for future annual report notifice	tion)
For further information (concerning this matter, please o	all:	
_	Jaimie Paul	at (561) 4	72-2121
Name	of Person	Area Code & Daytime	elephone Number
Enclosed is a check for t	he following amount:		
₹ 25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ING ADDRESS:	STREET/COURIE Registration Section	R ADDRESS:

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PILED 09 AUG 26 AM 8: 17 SECRETASSEE: FRORIES

MLY CONSULTING, LLC

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

(A Florida Limited Liability Company)

(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	in some bloomy company	')	ām —
The Articles of Organ zation for this Limited Liabil	ity Company were filed on _	October 1, 2008	and assigned
Florida document numberL0800009330	7 .		
This amendment is submitted to amend the following	ığ:·		
A. If amending name, enter the new name of the	limited liability company h	<u>iere</u> :	
MI	LY POPCORN, LLC		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Con	pany," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable	<u></u>		<u> </u>
(Principal office address MUST BE A STREET A	DDRESS)		- <u></u> -
			
	,		
Enter new mailing address, if applicable:			
<u>(Mailing address MAY BE A POST OFFICE BOX</u>	<u> </u>		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or receistered agent and/or the new registered office		s our records, <u>enter th</u>	e пите of the new
Name of New Registered Agent:		***	
New Registered Office Address:		<u></u>	
	i	Enter Florida street addre	
_		Florida	
	City		Zip Code
hita a tina at an			

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

Page 1 of 2

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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:

	Name	<u>Address</u>	Type of Actio
			Add Remove
			Add
			Ádd Remove
_			□ Damassa
		÷	□ D arrious
	·		
amend	ling any other information, enter	change(s) here: (Attach additional she	ets, if necessary.)
•			9 AUG CRET AHA
			O9 AUG 26 AM 8. SECRETARY OF STALLAHASSEE, FLO
	August 26	2009	FS AR

Page 2 of 2

Filing Fee: \$25.00