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B. KOHR
AUG 2 6 2009

EXAMINER

COVER LETTER

10:	Division of Co			•
CIID IE	·CT.	PFC Ma	nagement, LLC	
SUBJE	.C1:		ited Liability Company	
The end	closed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please	return all corresp	ondence concerning this matter	to the following:	
			Scott R. Schubiner	
			Name of Person	PE E T
		Jacob & Weingarten, P.C.		OS MIG 24 M 9:25
	Firm/Company		SSLET BE	
		2301 W. Big Beaver Road, Suite 777		
			Address	
			Γroy, Michigan 48084	*
			City/State and Zip Code	•
		SCOT E-mail address: (t@jacobweingarten.com to be used for future annual report notificati	on)
For fur	ther information	concerning this matter, please of	call:	
		tt R. Schubiner	at (9-1900
	Name	of Person	Area Code & Daytime Te	lephone Number
Enclose	ed is a check for	the following amount:		
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		tration Section ion of Corporations Box 6327	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



PFC Management, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on November 14, 2008 L08000106362 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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 office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Gildo Aragona	P.O. Box 640 Estero, Florida 33928	Add Remove
MGR	James Hacht	41123 Jo Drive Novi, Michigan 48375	✓ Add ☐ Remove
			Add
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information	enter change(s) here: (Attach additional sheets, if nec	essary.)
	July 1		
	Signatu	re of a member or authorized representative of a member	
	44	DONNEL M. DICKERSON	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00