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EXAMINER

W8-116013

COVER LETTER

TO: Registration S Division of Co					
SUBJECT:	Spatial Ne	etwork Apps, LLC			
	Name of Lim	ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are sul	omitted for filing.			
Please return all corresp	pondence concerning this matter	r to the following:			
		Barry Powers			
		Name of Person			
	S	Spatial Networks, Inc.			
		Firm/Company			
	1816	7 US HWY 19N, Suite	240		
		Address		_	
				208 SE	
	(Clearwater, FL 33764			Printing of
•		City/State and Zip Code		16 2 HAX	المددود المددودو
	barr	y@spatialnetworks.co	om .	- KEY - O	ر دستوسا
	E-mail address: (to be used for future annual repo	ort notification)		g, skrivitin
For further information	concerning this matter, please of	call:		2009 AUG 20 AM 10: 05 SECRETARY OF STATE FALLAHASSEE. FLORID	**************************************
E	Barry Powers	at (813)	763-8649	ਦੂਜ਼ ਹ	ł
Name	of Person		Daytime Telephone Num	nber	
Enclosed 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 er	Certif nclosed) Certif	Filing Fee, icate of Status & ied Copy ional copy is en	
MATI	INC ADDRESS.	CALP EDENT (V	OUDIED 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Spatial N	letwork Apps, L	LC		
(Name of the Limited Liability (A Florida I	Company as it now ap Limited Liability Company	pears on our records	<u>r)</u>	
`				
The Articles of Organization for this Limited Liability C	ompany were filed on	December 22,	2008 and assig	gned
Florida document numberLL080001166073				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limi	ted liability company	here:		
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Co	mpany," the designati	ion "LLC" or the ab	breviation
Enter new principal offices address, if applicable:			- 12	
(Principal office address MUST BE A STREET ADDR	ESS)		11. 1860 1861	eneg(Psi)
			AR 65	/usewayee
			SSE 20	-
Enter new mailing address, if applicable:				1.2
(Mailing address MAY BE A POST OFFICE BOX)			//	By Market
The state of the s			0: 05	
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr		on our records, <u>en</u>	ter the name of	the nev
registered agent and/or the new registered office addi	ess nere.			
Name of New Registered Agent:				
New Registered Office Address:				
		Enter Florida stree	t address	
		, Florid		
	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 MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Spatial Networks, Inc.	18167 US HWY 19N, Suite 240 Clearwater, Florida 33764	Add Remove
MGR_	Anthony J. Quartararo, III	18167 US HWY 19N, Suite 240 Clearwater, Florida 33764	Add Remove
			Add Remove
			Add Remove
		ASSET ASSET	Padd
D. If amend	ding any other information, enter c	hange(s) here: (Attach additional sheets, if necessary)	
			- -
Dated	July 7	2009	
	#17		-
	()	ember of authorized representative of a member	
	Anthony J. Quartararo, III, a	s President and Sole Shareholder of Sole Me	emper

Page 2 of 2

Filing Fee: \$25.00