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D. BRUCE
JUL 29 2010
EXAMINER

COVER LETTER

Registration Section

TO:

Division of C	Corporations					
SUBJECT:	APPTI	MATION, LLC				
		ited Liability Company				
The enclosed Articles	of Amendment and fee(s) are sul	bmitted for filing.				
Please return all corres	spondence concerning this matter	r to the following:				
	-	RUDY DEWULF		-		
		Name of Person APPTIMATION, LLC	41			
		Firm/Company		-		
	16	32 BONITA BLUFF CT		- -		
		Address			يع 50	-
		RUSKIN, FL 33570 City/State and Zip Code		NSS.	Ļ 28	
	RDV E-mail address: (V@APPTIMATION.COM	ification)		3	
For further information	n concerning this matter, please	•	,		F	1986
	DL J. FOSTER, E.A.	at (_941)	727-5253			٠
Nam	e of Person	Area Code & Daytii	me Telephone Numbe	Г		
Enclosed is a check fo	r the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified	ate of Stat		osed)
Regi Divi P.O.	ILING ADDRESS: istration Section sion of Corporations Box 6327 ahassee, FL 32314	STREET/COUR Registration Section Division of Corport Clifton Building 2661 Executive Country Tallahassee, FL 3	orations Center Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

APPTIMATI	ON, LLC		
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appea ability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company v	were filed on	02/25/2009	and assigned
Florida document numberL0900018673			
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company he	<u>re</u> :	
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Comp	any," the designation "L	LC" or the abbreviatio
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		·	3 0
	 		
		Ä	過た国
Enter new mailing address, if applicable:			9
(Mailing address MAY BE A POST OFFICE BOX)			2 1
		2	
			(1)
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here		our records, <u>enter t</u>	he name of the nev
Topiciona agent analysis no new registered office address nere	•		
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Er	nter Florida street add	ress
		, Florida	
	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	Matthew Ferringer	15049 CONFERENCE CENTER DR CHANTILLY, VA 20151 MAIL CODE: CH4-500	Add Remove		
MGRM_	Girvan Inst of Technology	200 CONTINENTAL BLVD, STE 301 EL SEGUNDO, CA 90245 CEO, Paul J. Coleman, Jr.	✓ Add ☐ Remove		
			Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
D. If amendi	ng any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)			
			- 10 L		
Dated	JULY 23 , 29	010	1, 14 W 92 M		
-	Signature of a member or authorized representative of a member				
<u>-</u>		RUDY DEWULF			
	Typed or printed name of signee				

Page 2 of 2

Filing Fee: \$25.00