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EXAMINER



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SECRETARY OF STATE OF CORPORATION

COVER LETTER

TO:

TO:	Registration Sec Division of Corp					
SUBJE						
~ 0 202		Name of Limi	ted Liability Company			
The en	closed Articles of A	amendment and fee(s) are sub	omitted for filing.			
Please	return all correspor	dence concerning this matter	to the following:			
Name of Person						
University Marketing LLC						
			Firm/Company			
7600-1 Alico Road #2						
			Address			
		For	rt Myers, Florida 33912			
City/State and Zip Code						
marketing6sigma@aol.com						
		E-mail address: (i	to be used for future annual report	notification)		
For fur	ther information co	ncerning this matter, please c	all:			
	Pete	r Cuderman	at (239)	223-8839		
	Name of	Person		ytime Telephone Number		
Enclose	ed is a check for the	e following amount:				
□\$2 5	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is encl	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Registra Division P.O. Box	NG ADDRESS: tion Section of Corporations x 6327 see, FL 32314	Registration S Division of Co Clifton Buildin	orporations		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Intense Ath (Name of the Limited Liability Compar (A Florida Limited L								
The Articles of Organization for this Limited Liability Company were filed on March 3, 2009 and assigned Florida document number L09000020980								
This amendment is submitted to amend the following:								
A. If amending name, enter the new name of the limited liabi	ility company here:							
University Mar	Y							
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Company," the designation "L	LC" or the	abbreviation .					
L.L.C.		=	SS					
Enter new principal offices address, if applicable:	7600-1 Alico Road #2		- <u>\$</u>.					
(Principal office address MUST BE A STREET ADDRESS)	Fort Myers, Florida 33912	<u> </u>						
	United States		02=					
		7	# 4 6					
Enter new mailing address, if applicable:	7600-1 Alico Road #2	**	<u> </u>					
(Mailing address MAY BE A POST OFFICE BOX)	Fort Myers, Florida 33912	29	TE.					
	United States		.					
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:								
	Cuy	zip Coae	<i>5</i>					

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 = Ma MGRM = N	nager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			□ n
	<u></u>		Powerse.
			D Dames
			□ D
D. If amend	ding any other information, en	ter change(s) here: (Attach additional sheets,	if necessary.)
		· · · · · · · · · · · · · · · · · · ·	
Dated	February 15	_,	
	Signature of	f a member or authorized representative of a member of	ber
		Peter Cuderman Typed or printed name of signee	

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Filing Fee: \$25.00