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May 19, 2009

Via UPS Overnight Mail

Florida Department of State Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

New Directions Partners, LLC Re:

Florida Document No. L09000029572

Dear Sir or Madam:

Enclosed please find Articles of Amendment to the Articles of Organization for the above-referenced limited liability company accompanied by our firm check in the amount of \$55.00 for your filing fee and certified copy fee. I am also enclosing an additional copy of this document as required. Please process the same and return the certified copy to me at the firm address listed above.

Thank you for your assistance in this matter.

Very truly yours,

COUZENS, LANSKY, FEALK, ELLIS, ROEDER & LAZAR, P.C.

Narold a. Larson

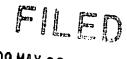
Harold A. Larson

HAL/dw Enc.

COVER LETTER

TO:	Registra Division						
SHRH	E CT:		NEW DIRECTION	ONS PART	NERS, LL	C	
30131	EC1			ted Liability Co			
The en	closed Arti	cles of A	mendment and fee(s) are sub	mitted for filing	7 .		
Please	return all c	orrespon	dence concerning this matter	to the following	g:		
			Harold A. Larson Name of Person				
			Couzens, Lansk	y, Fealk, Elli	is, Roeder &	Lazar, P	.C
	Firm/Company						
	39395 W. 12 Mile Road, Ste. 200						
				Addres	SS .		
			Fari		s, MI 48331		
			hous	City/State and	•		
			E-mail address: (1	to be used for fut	OUZENS.COM ire annual report no	tification)	
For fu	rther inform	nation co	ncerning this matter, please c	all:			
		Haro	ld A. Larson	at (_24		489-8	
		Name of	Person		Area Code & Days	ime Teleph	one Number
Enclos	sed is a chec	ck for the	e following amount:				••
\$2:	5.00 Filing	Fec	\$30.00 Filing Fee & Certificate of Status	\$55.00 Fi Certified (addition			\$60.00 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			STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	etion porations S Center Cir			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



09 MAY 20 AM 11: 31

NEW DIRECTIONS PARTNERS, LLGECRETARY OF STATE (Name of the Limited Liability Company as it now appears on but records) SEE FLORIDA (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liabi	lity Company were filed on	March 25, 2009	and assigned
Florida document numberL0900002957			
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	<u>e limited liability company h</u>	<u>ere</u> :	
NEW DIF	RECTION PARTNERS, L	LC	
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Com	pany," the designation "LL	.C" or the abbreviation
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	(DDRESS)		
	<u> </u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter the	e name of the new
Name of New Registered Agent:			
New Registered Office Address:		Enter Florida street addre	PSS
_	City	, Florida	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 = 1	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
<u></u>			Add Remove
			Add Remove
D. If amen	ding any other information, enter chang	e(s) here: (Attach additional sheets, if necessa	ry.)
_			09 HAY 21 SECRETAL
 Dated	May 15, 20	009	20 AM II: 3 ARY OF STATI
	Signature of a member	Crauthorized representative of a member	DA
		on, authorized representative	

Page 2 of 2

Filing Fee: \$25.00