## 109000031149

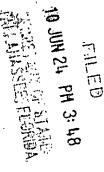
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S. HAWKES
JUN 2 5 2010
EXAMINER

## COVER LETTER

TO: Registration S Division of Co		;		
SUBJECT:	DATATRAN T	ECHNOLOGIES, L	.LC	1
		ited Liability Company		
	• •	1		
•		-		•
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.	•	
Please return all correspondent	ondence concerning this matter	r to the following:		, ,
			·	
•		CRAIG M. COOK		•
		Name of Person		
				· ·
	DATAT	RAN TECHNOLOGIE	S, LLC	1
•		Firm/Company		ì
	0.4		_	1
	61	111 FOSTER STREE	Ī	, , ,
		Address		:
•	JUE	PITER, FLORIDA 334	58	;
		City/State and Zip Code		
	CC	OKCPA1@AOL.COM	.1	i i
	E-mail address: (	to be used for future annual rep	ort notification	1)
For further information	concerning this matter, please of	call:	· · · · · · · · · · · · · · · · · · ·	!
	AIG M. COOK	at (_561 )	537	<del>,</del> 0000
Name o	of Person	Area Code &	Daytime Tele	phone Number
			,	1
Enclosed is a check for t	the following amount:	. :	1 k	,
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is ex		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
			·	-
MAILING ADDRESS:			COURIER A	DDRESS:
Registration Section Division of Corporations		Registration	n Section Corporation	; Q
P.O. Box 6327		Clifton Bui		
Tallah	assee, FL 32314		itive Center (	Çircle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## DATATRAN TECHNOLOGIES, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) MARCH 31, 2009 The Articles of Organization for this Limited Liability Company were filed on L09000031149 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: COOK CPA, LLC 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = M MGRM =	lanager Managing Member		,
<u>Title</u>	<u>Name</u>	Address	Type of Action
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D. If ame	nding any other information, enter cha	nge(s) here: (Attach additional sh	neels, if necessary.)
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Dated	June 21 ,	2010	
	Signature of a mem	per or authorized representative of a	member
		CRAIG M. COOK ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00