L09000031211

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SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

JUN 29 2009

EXAMINER

COVER LETTER

TO: 'Registration'S Division of Co				
SUBJECT:	TEDCO Ir	nvestments, LLC		
30BJEC1		ted Liability Company		
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.		
Please return all correspondence	ondence concerning this matter	to the following:		
		Frank P. Rainer	·····	_
		Name of Person		_
	Sterns	tein, Rainer & Clarke,	P.A	09 JUN 26 PH 1: 45 SECRETARY OF STATE FALLAHASSEE, FLORID
		Firm/Company		M 26 PH I
	41	1 East College Avenu	e	SER P
		Address		
	Tall	ahassee, Florida 323	01	_ 器5
		City/State and Zip Code		7
	raine E-mail address: (0	ersrc@embarqmail.co	ort notification)	
For further information of	concerning this matter, please c	all;		
<u> </u>	ank P. Rainer	at (_850)	577-6557	
Name o	of Person		Daytime Telephone Numb	er
Enclosed is a check for t	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy		cate of Status &
		(additional copy is e		ed Copy onal copy is enclosed)
MAIL	ING ADDRESS:	STREET/O	COURIER ADDRESS:	
	tration Section on of Corporations	Registration Division of	n Section Corporations	
	Box 6327	Clifton Buil		

Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TEDCO Investments, 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 ____ L09000031211 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: Magellan Trust, 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

	<u>Name</u>	Address	Type of Action
			Add Remove
			— <u> </u>
			Remove
			=_

			Add
If amend	ing any other information, enter chan	ge(s) here: (Attach additional sheets, if neces	ssary.)
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ted	June 18, 20	309,	JUN 26 PH 1: 45 AHASSEE, FLORIDA

Page 2 of 2

Filing Fee: \$25.00