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2010 MAR 12 PH 3: 03 SECRETARY OF STATE.

COVER LETTER

TO: Registration Section

Division o	of Corporations		•	
SUBJECT:	COMPLETE TRAIL	NING SOLUTIONS, L.L.C.		
SUBSECT:		ited Liability Company		
The enclosed Articl	les of Amendment and fee(s) are su	bmitted for filing.		
Please return all con	rrespondence concerning this matte	r to the following:		
		Scott D. Richards		
		Name of Person		
		Grass Appeal, L.L.C.	Note with which after the delication of the deli	
		Firm/Company	201	
	7	36 East Spruce Street	O MA	
		Address	R HAS	
	Tarpon Springs, FL 34689			
		City/State and Zip Code	2010 MAR 12 PM 3: 03 SECRETARY OF STATE TALLAHASSEE, FLORID	
			3: 03	
	E-mail address:	to be used for future annual report notification)] 2 Fit 3	
For further informa	tion concerning this matter, please	call:		
	Scott D. Richards	at (727) 417	-8255	
N	lame of Person	Area Code & Daytime Tele	phone Number	
England is a chock	for the following amount:			
\$25.00 Filing Fo	_	\$55.00 Filing Fee &	\$60.00 Filing Fee,	
.[▼] \$25.00 Filling Fe	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	
	AAILING ADDRESS: Legistration Section	STREET/COURIER A Registration Section	DDRESS:	
D	Division of Corporations 3.0. Box 6327	Division of Corporations Clifton Building	š	
	fallahassee, FL 32314	2661 Executive Center (Tallahassee, FL 32301	Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COMPLETE TRAINING	G SOLUTION	NS, L.L.C	· · · · · · · · · · · · · · · · · · ·		
(Name of the Limited Liability Compa (A Florida Limited I	Liability Company)	is on our records	<u>.</u>)		
The Articles of Organization for this Limited Liability Company	were filed on	05/01/2009	<u> </u>	nd assig	gned
Florida document numberL0900042233					
This amendment is submitted to amend the following:			•		
A. If amending name, enter the new name of the limited liab	oility company her	<u>re</u> :			
GRASS APPE	EAL, L.L.C.				
The new name must be distinguishable and end with the words "Lim" "L.L.C."	ited Liability Comp	any," the designati	on "LLC"	or the ab	breviation
Enter new principal offices address, if applicable:	736 East Spr	ruce Street	<u> </u>	201	
(Principal office address MUST BE A STREET ADDRESS)	Tarpon Sprin	igs, Florida 34	168 <u>9 (</u>	IO MAR	77
			SSAT	- 2	
Enter new mailing address, if applicable:	736 East Spr		SSEE, F	P	Ш
(Mailing address MAY BE A POST OFFICE BOX)	Tarpon Sprin	ngs, Florida 34	1689	ယ္	0
	 		E H	<u> </u>	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, <u>en</u>	<u>ter the n</u>	ame of	the new
Name of New Registered Agent:					
New Registered Office Address:		nter Florida stree	t address		
	En	пет т ил ши мгее	i uuuress		
	City	Florid,		p 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

<u>le</u>	<u>Name</u>	Address	Type of Action
<u> </u>			Remove
· · · · · · · · · · · · · · · · · · ·			☐ Add ☐ Remove
			F
			Remove
			∑ Remove
			
If amend	ling any other information, ente	er change(s) here: (Attach additional sheets	₽ ω
	Manala O	_. 2010 .	
ted	March 9		
ted	Acota	a member or authorized representative of a mem	

Page 2 of 2

Filing Fee: \$25.00