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SECRETARY OF STATE

M. THOWAS

MAY 14 2009

## **COVER LETTER**

Division of Co	rporations		
SUBJECT:	Mind4S	Solutions, LLC.	
Sebuter.		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please return all correspondent	ondence concerning this matte	r to the following:	
		Vimbai Mudimu	
		Name of Person	
	1	Mind4Solutions, LLC.	
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	1	145 Kennewick Court	TALLAHASSEE, FLORIO
		Address	- Legal H
	Wesley Chapel, FL 33543		
City/State and Zip Code		FF 星	
	vimbai.m E-mail address: (	nudimu@mind4solutions.com to be used for future annual report notificat	(in) (in) (in) (in) (in) (in) (in) (in)
For further information	concerning this matter, please	call:	
Vir	mbai Mudimu	at (813) 36	2-6901
	of Person	Area Code & Daytime To	
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 (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
MAIL	ING ADDRESS:	STREET/COURIER	ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

**Registration Section** 

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mino	d4Solutions, LLC.	*,		
( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appear a Limited Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liability	Company were filed on	5/6/09	and assigned	
Florida document numberL0900043841	<del>.</del>			
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the li</u>	mited liability company her	<u>e</u> :		
The new name must be distinguishable and end with the w"L.L.C."	ords "Limited Liability Compa	ny," the designation	"LLC" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADI	ORESS)		75 B 41	
			上海 三	
			3000	
Enter new mailing address, if applicable:			居宝 玉	
(Mailing address MAY BE A POST OFFICE BOX)			10: 50 10: 50	
	•		高品 50	
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		ur records, <u>enter</u>	the name of the new	
No. 1 (CNI) Decision of Access				
Name of New Registered Agent:				
New Registered Office Address:			1.1	
	Enter Florida street address			
		, Florida _		
	City		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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = M	anaging Member		
<u>Title</u>	Name	Address	Type of Action
MGRM	Vimbai Mudimu	1145 Kennewick Court Wesley Chapel, FL 33543	Add Remove
			Add Remove 
			Add Remove
			Add Remove
			Add Remove
D. If amendi	ing any other information, enter change(	s) here: (Attach additional sheets, if necessary.)	2003 HAVE 13 AH 10: 50 SEINTASSEE, FLURIE SEINTASSEE, FLURIE
			): 50 - (18)(5)
<del></del>			_ _ _
Dated	May 11th 200	grauthorized representative of a-member	
`	Vii	mbai Mudimu	<u>.</u>
	Typed or	printed name of signee	

Page 2 of 2

Filing Fee: \$25.00