## 109000044466

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## **COVER LETTER**

10:	Division of Co				
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SUBJE	CI:		ted Liability Company	- III - II - II - II - II - II - II -	
The enc	closed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please r	eturn all correspo	ondence concerning this matter	to the following:		古黑
N		NANCY PEMBROKE Name of Person		10 FEB 24 MII: 05	
					F. 8
	WILLIAM G. PEMBROKE, CPA, P.A.  Firm/Company				# 1
					S
8517 S US 1 Address					
		DO	T OT 1 1 10 15 51 0 10 50		
		POI	RT ST. LUCIE FL 34952 City/State and Zip Code	·	
		NA	NCY@WGPCPA.COM		
		E-mail address: (	to be used for future annual report r		
For furt	her information	concerning this matter, please of	call:		
		CY PEMBROKE	at (_772)	336-3331	
	Name (	of Person	Area Code & Day	ytime Telephone Number	
Enclose	ed is a check for t	he following amount:			
\$25.	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	Seed) \$60.00 Filing Fee Certificate of St Certified Copy (additional copy	atus &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registration Se	rporations		
			Tallahassee, FI	2 32301	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## AEGIS NETWORKS, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_ 05/07/2009 L09000044466 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: 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 City

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 = Managing Member

<u> </u>	<u>Name</u>	Address	Type of Action
MGRM	TAMMY LEE LEWIS	551 CADILLAC CIRCLE WEST MELBOURNE FL 32935	✓ Add Remove
<del></del>			Add Remove
<del></del>			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ding any other information, en	ter change(s) here: (Attach additional sheets, if necessary	).) 
  Dated	FEBRUARY 19	_,2010	
	3		
	Signature o	f a member or authorized representative of a member	
		BRIAN L. LEWIS, JR.  Typed or printed name of signee	

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Filing Fee: \$25.00