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# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

#### PRIMTEK SERVICES LLC

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#### COVER MESSAGE

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### **COVER LETTER**

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CHIDIEC	T. PRIMT	EK SERVICES LLC		
SUBJEC	. • <u> </u>	(Name of Lim	nited Liability Company)	
The enclo	osed Articles o	of Amendment and fee(s) are sub	omitted for filing.	
Please ret	turn all corres	pondence concerning this matter	to the following:	
		Tony Burroughs	(Name of Person)	· · · · · · · · · · · · · · · · · · ·
		Legalzoom.com, Inc	(Firm/Company)	
	•	7083 Hollywood Blve	d., Suite:180 (Address)	
			•	
		Los Angeles, CA 90	0028 (City/State and Zip Code)	
			(any name and any accord	
For further	r information	concerning this matter, please of	all:	
Tony B	Burroughs		at ( 323 ) 962-8600	
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	O Filing Fee	\$30,00 Filing Fee &	\$55.00 Filing Fee-&	\$60.00 Filing Fee,
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			Division of Corporati Clifton Building	ons

Taliahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

FILED

2009 AUG 17 AM 8: 49

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE TALLAHASSEE, FLORIDA

PRIMTEK SERVICES LLC			
( <b>Name of the Limited Liabili</b> (A Florida	ity Company as it now appears a Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability	Company were filed on 07/2	3/2009	and assigned
Florida document number <u>L09000070735</u>			
	<del></del>		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li-	mited liability company here	:	
The new mane must be distinguishable and end with the wall.L.C."	verds *Limited Liability Compan	y," the designation "LI	C" or the abbreviation
Name of New Registered Agent:  New Registered Office Address:	(Ent	ter Florida street add	ressj
	(City) (Zip Code)		•
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Register l hereby accept the appointment as registered agenthe provisions of all statutes relative to the proper accept the ohligations of my position as registered being filed to merely reflect a change in the registe company has been notified in writing of this chang	nt and agree to act in this cap and complete performance a agent as provided for in Cha cred office address, I hereby	of my chities, and I at apter 608, F.S. Or. i	m familiar with and Tihis document is
	(If Changing Registered Age	at, Signature of New Re-	gistered 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 = N MGRM =	Manager - Managing Member		
<u>Title</u>	Nume	Address	Type of Action
			Add Remove
,			Add Remove
			□Add
			Remove
			— ·
			Add
			Remove
	ending any other information, enter Article V. The address of all	er change(s) here; (Attach additional sheets, if r	necessary.)
•		#319, Jacksonville, FL 32256-8101	
	••		
Dated	Aug. 9	, 2009	
	William Robin	2/A	2009 TAI
	William Robinson, Membe		FILE TALLAHASS
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