Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : ARNOLD MATHENY & EAGAN, P.A.

Account Number : I2000000141 Phone : (407)841-1550 Fax Number : (407)841-8746

**Enter the email address for this business entity to be used for fiture annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PRESS 101 DEVELOPMENT LLC

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4/15/2011

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COVER LETTER

TO: Registrati Division o	n Section Corporations	
SUBJECT:	Press 101 Development LLC	
	Name of Limited Liability Company	
The enclosed Articl	s of Amendment and fee(s) are submitted for filing.	
Piease return all cor	espondence concerning this matter to the following:	
	Jean Womble	
	Name of Person	
	Amold, Matheny & Eagan, P.A.	
	PirnyCompany	
	605 E. Robinson St., Sulte 730	
	Address	
•	Orlando, FL 32801	3
	City/State and Zip Code	•
	alouv@ameorl.com B-mail address: (to be used for future annual report notification)	7
For further informat	on concerning this matter, please call:	1
·	Jean Womble at (407) 841-1550	
Na	ne of Person Area Code & Daytime Telephone Number	
Enclosed is a check	or the following amount:	
[]\$25.00 Piling Fo	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, PL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 H11000099893 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Press 101 Development 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	y were filed on July 23, 2009	_and assigned			
Florida document number L09000070882					
	•				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited lish	pility company here:				
-					
The new name must be distinguishable and end with the words "Lim	ited Liability Company," the designation "LLC	or the abhreviation			
"L.L.C."		\$2)			
Enter new principal offices address, if applicable:	7457 Somerset Shores Ct.	<u> </u>			
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL 32819				
	4	* E 20			
·		827 5 7			
Enter new mailing address, if applicable:	7457 Somerset Shores Ct.				
(Mailing address MAY BE A POST OFFICE BOX)	Orlando, FL 32819	500			
	3	G:0			
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:					
register of artist and of the new register out, and essent	<u>e</u> .	,			
Name of New Registered Agent:					
Hamis of How Regiments Offsite					
New Registered Office Address:	New Registered Office Address: Enter Florida street address				
	LAND 1 WHA MEET WINE 573				
	, Florida	Zip Code			
New Registered Agent's Signature, if changing Registered Agent:	•	ap coue			
ATEN ACCIONES OF CHIEF OF CHIEF OF THE CHIEF OF THE CONTROL OF THE	•				
I hereby accept the appointment as registered agent and agree					
the provisions of all statutes relative to the proper and complete the chliquities of my position an explication of any position and explication of the provision of the provisi					
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					

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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>Address</u> Type of Action <u>Title</u> Name 7457 Somerset Shores Ct. Orlando, Fl. 32819 MGR,P William J. Whitaker ∐ Add Remove Address Change Orly Braud Whitaker Add Remove 7457 Somerset Shores Ct. VP, S. T Orlando, FL 32819 💆 Address Change DbA 🔲 Remove Add Remove ∏Add Пкенюче □ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2011 Dated

> Typed or printed name of signee Page 2 of 2

William J. Whitaker, President

number or authorized representative of a member

Filing Fee: \$25.00