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EXAMINER



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SECRETARY OF STATE

COVER LETTER

Division of Corporations						
SUBJECT:	Strategic Perform	ance Management, LL	С			
		Name of Limited Liability Company				
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
		•				
		Phillip DAnnunzio				
		Name of Person				
	Strategic P	Strategic Performance Management, LLC				
		Firm/Company				
	1800	1800 Pembrook Ave, Suite 300				
		Address				
		Orlando, FL 32810				
	<u> </u>	City/State and Zip Code				
		phillip@stpmllc.com				
	E-mail address: (to be used for future annual report notif	fication)			
For further information	concerning this matter, please of	eall:				
Dhi	llin DAnnunzio	407	462-6342			
Phillip DAnnunzio Name of Person		at (407) Area Code & Daytin	ne Telephone Number			
•		·	·			
Enclosed is a check for	the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
MAILING ADDRESS:		STREET/COUR	IER 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

Strategic (Name of the Limited (A	Performance Liability Compa Florida Limited L	e Managemen ny as it now appears liability Company)	nt, LLC on our records.)			
The Articles of Organization for this Limited Li Florida document numberL09000078	and assigned					
This amendment is submitted to amend the following	owing:					
A. If amending name, enter the new name of	f the limited liab	ility company here	:			
The new name must be distinguishable and end wit "L.L.C."	h the words "Limi	ted Liability Compan	y," the designation "L	LC" or the abbreviation		
Enter new principal offices address, if applic	able:					
(Principal office address MUST BE A STREET ADDRESS						
Enton none mailing address if applicables		1800 Pembroo	ok Ava	SECRETO 1/\$10N 0.		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Suite 300	N AVE	352		
1		Orlando, FL 32		H STA		
B. If amending the registered agent and/oregistered agent and/or the new registered of	or registered of fice address her	fice address on ou <u>e</u> :	ır records, <u>enter t</u> l	ne name of the new		
Name of New Registered Agent:	Phillip K DAnnunzio					
New Registered Office Address:	1800 Pembrook Ave, Suite 300					
	Enter Florida street address					
		Orlando	, Florida	32810		
		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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGKM = Managing Member **Title Address Type of Action** Name Tracy M Stein Mr. 1511 Harston Ave □Add ∇ Remove Orlando, FL 32814 Patricia V Stein Mrs. 1511 Harston Ave ☐ Add Orlando, FL 32814 ✓ Remove ☐ Add Remove Add Remove ∏Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

ignature of a member or authorized representative of a member

2009

September, 17

Dated ___

Phillip K DAnnunzio Typed or printed name of signee

Page 2 of 2 Filing Fee: \$25.00