L09000083509

E.GRIFFITHS-GORAW				
5513 Caurus et.				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
,				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



900230639869

94/23/12--01028--034 ******25.00

12 APR 23 PM 2: 01

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

APR 2.4 2012 T. **HAMPTON**

TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE DIVISION OF CORPORATIONS

DIGITAL	V-004 C	110 TIS 110	, 1	12 APR 23 PM 2: 01
(Name of the Limited	Liability Compa	YSTEMS LLO ny as it now appears on o Liability Company)	our records.)	
(A	Florida Limited 1	. (. • 1	
The Articles of Organization for this Limited Li	ability Company	were filed on 8	28/09	and assigned
Florida document number <u>L090005</u>	33509		•	,
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
E. L. V. S., LLC The new name must be distinguishable and end wit		€	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
The new name must be distinguishable and end wit "L.L.C."	h the words "Limi	ted Liability Company," t	he designation	"LLC" or the abbreviation
Enter new principal offices address, if applications	able:	5513 CAURU	S COUR-	r
(Principal office address MUST BE A STREE	T ADDRESS)	ORLANDO, 1	FL 37	308
Enter new mailing address, if applicable:		·		
(Mailing address MAY BE A POST OFFICE I	BOX)			
B. If amending the registered agent and/o	or registered of	fice address on our re	ecords, <u>enter</u>	the name of the new
registered agent and/or the new registered of	fice address her	<u>e</u> :		•
	C			, 1
Name of New Registered Agent:		ETH J. GIRIF		
New Registered Office Address:	5513 1	AURUS COURT. Enter Fl		
	₹.	Enter Fl	orida street a	ddress
	_OBL	ANDO City	, Florida _	32808
		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

or managing member being added or removed from our records:

<u>Title</u>	Name	Address	Type of Action
MBR	EUZABETH GARRETT		Add Remove
MBR	MARCUS Z. SHAW		Add
4			Add Remove
			Add Remove
	•		Add Remove
		•	Add Remove
	TE: MAILLOG ADDILESS	(s) here: (Attach additional sheets, if necessary SAME - DRIANDO FT 32808	· <i>)</i>
-	H/2 200	4.20/2	SECRETAR DIVISION OF 1

Page 2 of 2

Filing Fee: \$25.00