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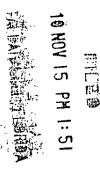
| (Re | equestor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL. |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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EXAMINER NOV 1 6 2010

COVER LETTER

| TO: Registration So Division of Cor | |
|--|---|
| SUBJECT: | Prospect Marketine, LLC Name of Limited Liability Company |
| The enclosed Articles of | Amendment and fee(s) are submitted for filing. |
| Please return all correspo | ondence concerning this matter to the following: |
| | ANGELA ESTES Name of Person |
| | Prospect Marketing, LLC Firm/Company |
| | 1245 5, POWErline Rd # 134 Address |
| | Pompano BEACH, FL 33069 City/State and Zip Code |
| | E-mail address: (to be used for future annual report notification) |
| For further information c | oncerning this matter, please call: |
| ANGELA Name o | Terson at (H07) 433-4244 Area Code & Daytime Telephone Number |
| Enclosed is a check for the | ne following amount: |
| \$25.00 Filing Fee | \$30.00 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, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

产几位数数

| | Or | 15 PM 1:51 |
|---|--|--|
| (Name of the Limited | CT MARK HING, LLC I Liability Company as it now appears on of A Florida Limited Liability Company) | L AND A MARE |
| The Articles of Organization for this Limited L Florida document number <u>L090000</u> & | iability Company were filed on SEP | TEmber 4, 2009 and assigned |
| This amendment is submitted to amend the foll | | |
| A. If amending name, enter the new name o | f the limited liability company here: | |
| The new name must be distinguishable and end wi "L.L.C." | th the words "Limited Liability Company," the | he designation "LLC" or the abbreviation |
| Enter new principal offices address, if applic | able: | |
| (Principal office address MUST BE A STREE | ET ADDRESS) | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) | | |
| B. If amending the registered agent and/ registered agent and/or the new registered of | ffice address here: | |
| Name of New Registered Agent: | ANGELA ESTE | |
| New Registered Office Address: | 1245 5 POWER line | Nd #134 prida street address |
| | Pompano BEACH City | , Florida <u>33069</u> Zip Code |
| New Registered Agent's Signature, if changing I | 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 of the second confirm that the limited liability company has been notified in writing of this change.

Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member Type of Action Title Name Address Kelby Coleman Robert Loonis 4322 Playa Court m cam MIKE SMEE MCRM 307 NW 107H Ter NAdd D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated November 9 Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00