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## **COVER LETTER**

| Division of Cor            |                                  |   |   |         |
|----------------------------|----------------------------------|---|---|---------|
| SUBJECT: C 3               | G Unified, L                     | LC  |   |         |
| -                          | Name of Lim                      | ited Liability Company                      |   |         |
|                            |                                  |   |   |         |
| The enclosed Articles of   | Amendment and fee(s) are sub     | mitted for filing.                          |   |         |
| Please return all correspo | ndence concerning this matter    | to the following:                           |   |         |
|                            |                                  | ,   |   |         |
|                            | Stephanie                        | Chen  |   |         |
|                            |                                  | Name of Person                              |   |         |
|                            |                                  |   |   |         |
|                            |                                  | Firm/Company                                | TAL SE  |         |
|                            | 1000 000                         | Centre Blvd.                                | ·#136 管   | <u></u> |
|                            | 1000 Park                        | Address                                     | 2014 新 18 FM 3: 18 | garant. |
|                            |                                  | 1 0 = 1 221                                 |   |         |
|                            | <u>Miami Ga</u>                  | rdcns, FL 331 City/State and Zip Code       | 69 FLORIDA STATE  |         |
|                            | leonor.re                        | osano@chenm                                 | red.com   | ı       |
|                            | E-mail address: (                | to be used for future annual report notifi  |   |         |
| For further information co | oncerning this matter, please ca | all:  |   |         |
| مالم اند                   | A A n : (2) 1 1 mm 2             | 200 120                                     | ( ) 2 (   |         |
| Michelle<br>Name o         | Martinez<br>f Person             | at ( <u>305) 628 -</u><br>Area Code Daytime | Telephone Number  |         |
|                            |                                  | ·   | •   |         |
| Enclosed is a check for th | ne following amount:             |   |   |         |
| \$25.00 Filing Fee         | □ \$30.00 Filing Fee &           | ☐ \$55.00 Filing Fee &                      | □ \$60.00 Filing Fee,   |         |
| A \$25.00 1 1g . 00        | Certificate of Status            | Certified Copy                              | Certificate of Status &   |         |
|                            |                                  | (additional copy is enclosed)               | Certified Copy (additional copy is enclosed)  |         |
|                            |                                  |   |   |         |
| B. A. A. T. Y.             | INC ADDRESS                      | gmp.pm/gover                                | TP ADDRESS  |         |
| MAIL                       | ING ADDRESS:                     | STREET/COURIE                               | SK ADDKESS:   |         |

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| C 3 G Unified  (Name of the Limited Liability (A Florida L   | Company as it now appears on our records.) imited Liability Company)     |
|--|--|
| The Articles of Organization for this Limited Liability Cor<br>Florida document number <u>L090009795</u>   | mpany were filed on 10 09 2009 and assigned                              |
| This amendment is submitted to amend the following:  |  |
| A. If amending name, enter the new name of the limite  | ed liability company here:   |
| Eminence Group, LLC  |  |
| The new name must be distinguishable and end with the words "Limi  | ted Liability Company," the designation "LLC" or the abbreviation "LLC." |
| Enter new principal offices address, if applicable:  | الله الله الله الله الله الله الله الله                                  |
| (Principal office address MUST BE A STREET ADDRE   | (SS)   |
|  | \$5.7.7 <b>0</b>   |
|  |  |
| Enter new mailing address, if applicable:  |  |
| (Mailing address MAY BE A POST OFFICE BOX)   |  |
| B. If amending the registered agent and/or registe registered agent and/or the new registered office addre | red office address on our records, enter the name of the new ss here:    |
| Name of New Registered Agent:  | · · · · · · · · · · · · · · · · · · ·                                    |
| New Registered Office Address:   |  |
|  | Enter Florida street address   |
|  | , Florida  |
|  | 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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>      | Address                                | Type of Action  |
|--------------|------------------|--|-----------------|
| MGRM         | Christopher Chen | 2672 Riviera Manor                     | Add             |
|              |                  | Weston, FL 33332                       | Remove          |
| M <u>GRM</u> | Gordon Chan      | 2668 Riviera Manor<br>Weston, FL 33332 |                 |
| ST           | Mary Chan        | 2668 Riviera Manor<br>Weston, FL 33332 | [31]            |
|              |                  |  | P. F. GRIDE Add |
|              |                  |  |                 |
|              | <del></del>      |  |                 |
|              |                  |  | •               |

|  |  | <u>-</u>                                      |
|--|--|---|
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| fective date, if c   | other than the date of filing:(  | optional)                                     |
| ffective date, if one effective date must be date this document            | other than the date of filing:  If be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 t is filed by the Florida Department of State) | optional)<br>days after                       |
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| Effective date, if of the effective date must the date this document Dated | t be specific, cannot be prior to date of receipt or filed date and cannot be more than 90   | ( <b>optional)</b><br>days after              |

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