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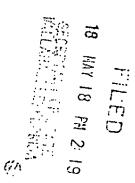
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COVER LETTER

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enn neer	US PEPTIC	DES LLC		
SOBJEC	Γ:	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub	-	
		Cherie Hanley, Paralegal		
		- ·	Name of Person	······································
		ENGLANDER FISCHER		
Firm/Company				
721 First Avenue north				
			Address	
		St. Petersburg, FL 33701		
City/State and Zip Code				
chanley@eflegal.com E-mail address: (to be used for future annual report notification)				ention
For furthe	r information c	oncerning this matter, please c	·	cuttony
Cherie Ha	inley		727 \$98-7210 ext.	242
	Name o	f Person	at ()	Telephone Number
Enclosed	is a check for th	ne following amount:		
\$25.00	0 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)
	31411	ING ADINDESS.	STDEET/COUDIE	ED ANNUECC.

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 OF

US PEPTIDES LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	6
The Articles of Organization for this Limited L Florida document number L10000008329	.iability Company	were filed on 01-22-2010	and assigned
This amendment is submitted to amend the foll	owing:		(b)
A. If amending name, <u>enter the new name o</u>	f the limited ligh	oility company here:	
N/A			
The new name must be distinguishable and contain the	words "Limited Lizbi	ility Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	32196 US Hwy 19 North	
(Principal office address MUST BE A STREET ADDRESS)		Suite B	
		Palm Harbor, FL 34684	· · · · · · · · · · · · · · · · · · ·
Enter new malling address, if applicable:		32196 US Hwy 19 North	
Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
		Palm Harbor, FL 34684	
B. If amending the registered agent and registered agent and/or the new registered o	Mce address her	re:	iter the name of the new
Name of New Registered Agent:	Bavaro, Cateria	na	
New Registered Office Address:	32196 US Hwy	y 19 North, Suite B	
		Enter Florida street address	
	Palm Harbor	, Florida	в 34684
	-	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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Company of the Company

<u>Title</u>	Name	Address	Type of Action
MGR	Pierce, Don H.	110 Poinciana	DAdd
		Largo, FL 33770	■ Remove
			☐ Change
MGR	US Online Solutions, LLC	32196 US Hwy 19 North	
		Suite B	□ Remove
		Palm Harbor, FL 34684	Change
			D Add
			Remove
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Tective date, if other than the da	te of filing:		(optional)	
in effective date is listed, the date must be one; If the date inserted in this block	specific and cannot be	prior to date of fil	ing or more than 90 days	after filing.) Pursuant to	o 605.0207 (3) • listed as the
ocument's effective date on the Department	rtment of State's rec	ords.	ry mmg roquiromena	,	, ,,,,,,,
record specifies a delayed e The 90th day after the record		t not an effe	ctive time, at 12:	01 a.m. on the e	arlier of:
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