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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

JAN 2 8 2010

EXAMINER

COVER LETTER

	on Section f Corporations				
SUBJECT:		CONTRIB	UTIONLINK,	LLC	
			ted Liability Compa		
The enclosed Articl	es of Amendmen	t and fee(s) are sub	omitted for filing.		
Please return all con	rrespondence con	cerning this matter	to the following:		
		[BRECHT HEU		
			Name of Perso	n	
THE LABRADOR COMPANY, INC.					
	Firm/Company				
		PO BOX 10549			
			Address		
	TALLAHASSEE, FL 32302				
			City/State and Zip		
		BRECHT E-mail address: (@BRECHTHE to be used for future a	UCHAN.COM	tion)
For further informa	tion concerning t	·			,
В	RECHT HEU	CHAN	at (850	, 3	45-2937
N	ame of Person			a Code & Daytime 1	Telephone Number
Enclosed is a check	for the following	g amount:			
\$25.00 Filing Fo) Filing Fee & ifficate of Status	\$55.00 Filing Certified Co (additional)		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
R D P	1AILING ADDI egistration Section Division of Corpo O. Box 6327 Callahassee, FL 32	on rations	Re Di Cli	REET/COURIE gistration Section vision of Corporat fton Building 61 Executive Cent	ions

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CONTRIBU	JTIONLINK, LLC		
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on ited Liability Company)	our records.)	
,	, , , , , , , , , , , , , , , , , , , ,		
The Articles of Organization for this Limited Liability Com	npany were filed onJANU	JARY 22, 2010 and assig	med
Florida document numberL1000008331			
This amendment is submitted to amend the following:		,	
A. If amending name, enter the new name of the limited	d liability company here:		
	, , , , , , , , , , , , , , , , , , , ,		
The new name must be distinguishable and end with the words	"Limited Liability Company."	the designation "LLC" or the ab	breviation
"L.L.C."	1 2	C	
Enter new principal offices address, if applicable:			-14.
(Principal office address MUST BE A STREET ADDRES	SS)		S ≥
		<u> </u>	SE
			2 m
Enter new mailing address, if applicable:		27	
(Mailing address MAY BE A POST OFFICE BOX)		7	- 8 96
(Multing uddress MAT BE A FOST OF FICE BOX)		<u> </u>	- <u>Š</u>
B. If amending the registered agent and/or registere	ed office address on our	ecords, enter the name of	the new
registered agent and/or the new registered office addres		,	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter F	lorida street address	
<u> </u>		, 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 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

MGRM = Managing Member <u>Title</u> Name **Address** Type of Action THE LABRADOR CO, INC. MGRM _ Add 907 N. GADSDEN STREET Remove PO BOX 10549 TALLAHASSEE, FL 32303 ☐ Add Remove ☐ Add Remove Add Remove ___Add Remove □ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated JANUARY 26 2010 Signature of a member or authorized representative of a member **BRECHT HEUCHAN** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00