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C. LEWIS SEP 2 4 2010 EXAMINER

COVER LETTER

TO:	Registration S Division of Co	Section orporations		s, &
•4	·•• .	050 BL 00	OK CDOUD LLC	
SUBJE	ECT:		CK GROUP, LLC	
	•	Name of Limi	ted Liability Company	
The en	closed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please	_	ondence concerning this matter	to the following:	
•			Eric W. Ludwig	
			Name of Person	
		250	BLOCK GROUP, LLC	
• Firm/Co			Firm/Company	
250 N. ORANGE AVENUE SUITE 1250				1250
Address				
	ORLANDO, FL 32801 City/State and Zip Code leslieplee28@gmail.com			
		E-mail address: (to be used for future annual report n	otification)
For fur	ther information	concerning this matter, please of	eall:	
		Eric Ludwig	at (_407)	425-0442
	Name	of Person	Area Code & Day	time Telephone Number
Enclose	ed is a check for	the following amount:		
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	\$60.00 Filing Fee, Certificate of Status & Sed) Certified Copy (additional copy is enclosed)
	Regis Divisi P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	STREET/COL Registration Se Division of Cor Clifton Building 2661 Executive Taliahassee, FL	porations 3 Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2010 SEP 23 PM @ 03

25 (<u>Name of the Limited</u> (A	O BLOCK GROUP, LLC Liability Company as it now appea Florida Limited Liability Company)	TA bis A M A Co	RY DE STATE S EE : FL ORIDA	
The Articles of Organization for this Limited Lie Florida document numberL10000011	, ,	01/29/2010	and assigned	
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liability company her	<u>:e</u> :		
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compa	any," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applica	ible:			
(Principal office address MUST BE A STREE)	T ADDRESS)			
Enter new mailing address, if applicable:	***************************************			
(Mailing address MAY BE A POST OFFICE)	<u></u>			
B. If amending the registered agent and/or registered agent and/or the new registered off		our records, enter t	he name of the new	
Name of New Registered Agent:	Eric W. Ludwig			
New Registered Office Address:		tou Florida atuast add		
·	Enter Florida street address			
	City	, Florida	Zip Code	
N. D. C. M. D. C. M. D.				

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 Title . <u>Name</u> **Address Type of Action MGRM** GRS NOTE MANAGERS, L 250 N. ORANGE AVENUE ☐ Add √ Remove **SUITE 1250** ORLANDO, FL 32801 MGRM GARY G THARP 250 N. ORANGE AVENUE ✓ Add **SUITE 1250** Remove ORLANDO, FL 32801 **MGRM** ERIC W LUDWIG 250 N. ORANGE AVENUE ✓ Add SUITE 1250 Remove ORLANDO, FL 32801 CLAUDE WOLFE MGRM 250 N. ORANGE AVENUE **✓** Add Remove SUITE 1250 ORLANDO, FL 32801 □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 20 Dated_ gnature of a member or authorized representative of a member Eric W. Ludwig Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00