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ALLABASSEE, FLORID

S. HAWKES
FEB 1 2 2010
EXAMINER

COVER LETTER

, Division of Corporations
SUBJECT: TEXT 2 CELL MARKETING LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:
Rick A. STEPHENS Name of Person
TEXT 2 CELL MALKETING LLC Firm/Company
3660 NW 277H STREET Address
LANDEADALE LAKES FL 333// City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rick A. STEPHENS at (954) 3/9-5/30 Name of Person Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S10.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}

MAILING ADDRESS:

. - "

TO:

Registration Section

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

TEXT 2 CELL	MARKETING LLC	
(Name of the Limited Li (A Fl	ability Company as it now appears on orida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liab		10//10 and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	ne limited liability company here:	是 6
The new name must be distinguishable and end with to "L.L.C."	he words "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET	ADDRESS)	
		95 S
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter 1	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 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records:</u>

MGR = M MGRM =	1anager - Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGA	ANTHONY STEPHENS	3660 NW 27TH ST. LAUDERDAIR LKS FC 33311	Add Remove
MGR	RICK ANTHONY STEPHENS	3660 NW J79H ST. LANDELDAIE LKS FL 333/1	Add Remove
			Add Remove
			-C AMI
			ALL Remove
			Add Remove
D. If ame	nding any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
-			
			-
Dated	Signature of a member	or authorized representative of a member	
	Rick A. STEDH	1	

Page 2 of 2

Filing Fee: \$25.00