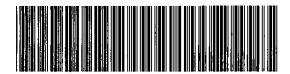
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(Re	equestor's Name)	
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SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

JUN - 6 2011

**EXAMINER** 

## **COVER LETTER**

TO:

**Registration Section** 

Tallahassee, FL 32314

Division of Co	orporations			
SUBJECT:	Gold Min	ing America LLC	•	
Sobsect.		ited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.		
Please return all corresp	oondence concerning this matter	r to the following:		
		Thomas Quirk		
		Name of Person		
		Firm/Company	SECR THE T	
		rirm/Company	最子	
	1	16715 Bay Club Drive		
		Address	of Fr	
		Clermont, FL 34711	FILE PHIZ: 03	
		City/State and Zip Code		
	F-mail address: (	omquirk1@gmail.com to be used for future annual report notifi	cation)	
For further information	concerning this matter, please of	•	···	
Т	homas Quirk	at ( 407 )	509-1175	
Name	of Person	Area Code & Daytime	e Telephone Number	
Enclosed 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 enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	LING ADDRESS: tration Section	STREET/COURING Registration Section		
Divisi	on of Corporations Box 6327	Division of Corpora Clifton Building		

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gold	Mining Ai	merica LLC		·	
(Name of the Limited Liab (A Flori	da Limited Lia	y as it now appears ability Company)	on our records.)		
The Articles of Organization for this Limited Liabilit Florida document number L10000022193	• • •	vere filed on	2-26-2010	and assigned	
This amendment is submitted to amend the following  A. If amending name, enter the new name of the	•	ity company here:	<u> </u>	FILE OF S	*
Encor	npass Rec	ruitina LLC		79 = 0	3
The new name must be distinguishable and end with the "L.L.C."	•		," the designation "	LLCoorthe abrevia	_
Enter new principal offices address, if applicable:		N/A		To the second se	_
<u>(Principal office address MUST BE A STREET AD</u>	DRESS)				_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1	N/A			_
B. If amending the registered agent and/or re registered agent and/or the new registered office a			r records, enter	the name of the 1	 <u>nev</u>
Name of New Registered Agent:	N/A		y ,		
New Registered Office Address:					
		Enter	r Florida street add	lress	
	. <del> </del>		, 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 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 = Ma MGRM = 1	anager Managing Member	·	
<u>Title</u>	<u>Name</u>	Address	Type of Action
	<del></del>		Add Remove
<del> </del>			Add Remove
			Add Remove
			Add
			Remove Add
			Remove
D. If amen	We are only of the LLC.	e(s) here: (Attach additional sheets, if necessary.	FI JUN-
		10-	PHIZ: 03
Dated	Signature of a mamba	2 m/	············
		or authorized representative of a member  Or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00