Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number .: (850)617-6383

From:

Account Name : LEGALZOOM.COM INC. Account Number : 120010000062

Phone : (323)962-8600 Fax Number : (323)962-3889

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ALLAHASSEE, FI ORDIA

LLCAMND/RESTATE/CORRECTORM/MGRESIGN DIGITALSECURE, LLC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

T. HAMPTON MAR 1 8 2010

EXAMINER

COVER LETTER

TO: Registration S Division of Co			
SUBJECT: DIGITA	L SECURE, LLC		
		nited Liability Company)	
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
	Tony Burroughs		
		(Name of Person)	
	Legalzoom.com, Inc		
		(Firm/Company)	
	7083 Hollywood Blve		
		(Address)	
	Los Angeles, CA 90		
		(City/State and Zip Code)	
For further information	concerning this matter, please of	eall:	
Tony Burroughs		at (323) 962-8600	
	of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for t	he following amount:		
\$25,00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DIGITAL SECURE, LLC
(Name of the Limited Liability Company)

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability	y Company were filed on <u>03/03/20</u>	10 and assigned
Florida document number <u>L10000024111</u>		
This amendment is submitted to amend the following	:	
A. If amending name, <u>enter the new name of the l</u>	imited liability company here:	
The new name must be distinguishable and end with the value. L.L.C." B. If amending the registered agent and/or represented agent and/or the new registered office a	gistered office address on our rec	•
Name of New Registered Agent:		
New Registered Office Address:		
THE TORREST OF THE CAMPES.	(Enter Flo	rida 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)

MGR = Ma MGRM = N	nager ⁄lanaging Member	,	
<u>litle</u>	Name	Address	Type of Action
			Remove
	· · · · · · · · · · · · · · · · · · ·		
			Add Remove
			Add
If amend	ing any Other information enter o	change(s) here: (Attach additional sheets, if nec	
		aging member was erroneously stated	•
CH	IRISTOPHER R DEMARIA		
Th	e name of the managing men	nber shall be: C. Randall De Maria	<u> </u>
_			VISION DE C
ated	March 11	2010	R 17
	C. Lot Ille	<u>,</u> 	RPORATIO
	Signature of a m	ember or authorized representative of a member	A OC

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Filing Fee: \$25.00