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B. KOHR

MAY 2 0 2010

EXAMINER

10 HAY 19 PH 4: 44

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Remier Prov	Je Ay Man ac om.	nt Solutions ILC.
	Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Lia	· · · · · · · · · · · · · · · · · · ·	1 31, 2010 and assigned
Florida document number 1000003	35085	K.
This amendment is submitted to amend the follow	wing:	0 , 1
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and end with	the words "I imited I inhility Company	" the designation "I I C" on the abbreviation
"L.L.C."	the words. Elimied Elability Company	, the designation LLC of the appreviation
Enter new principal offices address, if applical	ble:	•
(Principal office address MUST BE A STREET	ADDRESS)	
		
Enter new mailing address, if applicable:	B-000-007-007-007-007-007-007-007-007-00	
(Mailing address MAY BE A POST OFFICE B	<u> </u>	
•		
B. If amending the registered agent and/or registered agent and/or the new registered offi		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter 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 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> <u>Name</u> <u>Address</u> **Type of Action** ☐ Add Remove ☐ Add Remove ☐ Add Remove Add Remove \square Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated May 19 Signature of a member or authorized representative of a member

Typed or printed name of signee
Page 2 of 2

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