100000 42924

(Re	questor's Name)	
(Ad	dress)	
-bA)	dress)	
(Cit	y/State/Zip/Phone	e #1)
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SECRETARY OF STATE
AND ASSEE, FLORIDA

J. BRYAN

AUG 1 6 2011

EXAMINER

COVER LETTER

TO:	Registration S Division of Co				
SUBJI	ест:		ition Management, LLC		
		Name of Lim	ited Liability Company		
The end	closed Articles o	f Amendment and fee(s) are su	bmitted for filing.		
Please	return all corresp	ondence concerning this matte	r to the following:		
			Peter Robertson		
			Name of Person .		
		Dispute l	Resolution Management, LI	_C	
			Firm/Company		克公 二
		554	7 A1A South, Suite 108		FILED PH 2:5
		,	Address		ASS. 55 T
		Si	t. Augustine, FL 32080		能是一
			City/State and Zip Code	······································	FFS ?
		pet	er@robertsonfirm.com		聖公
			to be used for future annual report notifi	(cation)	2
For furt	her information (concerning this matter, please of	call:		
	Pet	ter Robertson	at (904)	853-2612	
	Name	of Person	Area Code & Daytime		r
Enclose	d is a check for t	the following amount:	٠.		
₹ \$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) Certified	te of Status &
			•		

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations Clifton Building see, FL 32314

2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dispute Resolution	on Management	, LLC	·
(Name of the Limited Liability Cor (A Florida Limit	mpany as it now appear led Liability Company)	<u>s on our records.</u>)	
The Articles of Organization for this Limited Liability Comp	oany were filed on	4/21/2010	and assigned
Florida document number <u>U0000042924</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company her	2:	
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Compa	ny," the designation "l	LC" or the abbreviation
Enter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·		ALE SE
(Principal office address MUST BE A STREET ADDRESS	<u> </u>		器号
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			S PH 2: 51
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		ur records, <u>enter (</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:	Frat	er Florida street ada	lrass
	Emi		1033
	City	, Florida	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 = Manager

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:

MGRM = N	Managing Member		•
<u> Fitle</u>	Name	Address	Type of Action
VP	Justin Mowitz	5547 A1A South, Suite 108 St. Augustine, FL 32080	Add Add Remove
			Add
			Adá Remove
	·		Add Remove
			Add Remove
	ling any other information, enter chang ease remove Justin Mowitz as VP	ge(s) here: (Attach additional sheets, if necesso	מיץי.)
_			SECRETARY OF ALLAHASSEE.
Dated	8-11-4		PH 2: 5
	Pe	or or authorized representative of a member eter A. Robertson or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00