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EXAMINER MAY 2 2011

## **COVER LETTER**

Registration Section
Division of Corporations

TO:

SUBJECT:	Sloane Macker	nzie Public Affairs, LLC				
		ited Liability Company				
The enclosed Article	es of Amendment and fee(s) are su	bmitted for filing.				
Please return all cor	respondence concerning this matte	r to the following:				
		Timothy P Buckley				
	Name of Person					
	Sloane Mackenzie Public Affairs, LLC					
Firm/Company						
	874 Bending Oak Trail					
Address						
	Winter Garden, FL 34787					
	City/State and Zip Code					
	tbuckle E-mail address: (	ey@sloanemackenzie.com to be used for future annual report noti	ification)			
For further informat	ion concerning this matter, please	call:				
	Tim Buckley	at (_321 )	438-1888			
Nε	me of Person		ne Telephone Number			
Enclosed is a check	for the following amount:					
<b>▼</b> \$25.00 Filing Fe	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 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/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	orations enter Circle			

## TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

11 APR 28 PM 1:37

SEUNLIARY OF STATE
FALLAMASSEE, FLORIDA

Sloane Mackenzie Public Affairs, LLC

(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 L	-	April 28, 2010	and assigned		
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited liability company he	ere:			
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Comp	pany," the designation "L	LC" or the abbreviation		
Enter new principal offices address, if appli	cable:				
(Principal office address MUST BE A STREET ADDRESS)					
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE	<u></u>				
B. If amending the registered agent and registered agent and/or the new registered of		our records, enter t	he name of the new		
Name of New Registered Agent:	Timothy P Buckley				
New Registered Office Address:	874 Bending Oak Trail				
NOW REGISTERS STREET TRAINESS.	Enter Florida street address				
	Winter Garden	, Florida	34787		
	City		Zip Code		
New Registered Agent's Signature, if changing	Registered Agent:				
I hereby accept the appointment as register the provisions of all statutes relative to the paccept the obligations of my position as regbeing filed to merely reflect a change in the company has been notified in writing of this	proper and complete performance istered agent as provided for in C registered office address, I heret	e of my duties, and I a Chapter 608, F.S. Or,	m familiar with and if this document is		

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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 **Type of Action Title** <u>Name</u> **Address MGRM** Mary E Buckley 874 Bending Oak Trail
Winter Garden, Florida 34787 ✓ Remove ☐ Add ☐ Remove Remove ∏ Add Remove □Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) April 26 2011 Dated \_ Signature of a member or authorized representative of a member Timothy P. Buckley

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00