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COVER LETTER

Division of Co			
SUBJECT: No	olcondec Investments,	LLC	
	Name of Lim	ited Liability Company	
	f Amendment and fee(s) are sul		
	Melanie	Name of Person	
•		Name of Ferson	52
•	New England H	ish Market	
	,	Firm/Company	
	1419 Jensen B	Roach Rlyd	MIN JUNI 17 PH 2: 39
	1419 Jensen 1	Address	
			2 2
	Stuart, Flori		
		City/State and Zip Code	***
	mel@newenglar	ndfish.net	
	E-mail address: (to be used for future annual report notified	ition)
For further information	concerning this matter, please	call:	
Melanie		at (772) 334-6666 e	
Name	of Person	Area Code & Daytime	l'elephone 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)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nolcondec Investmen	nts, LLC	
(Name of the Limited Liability Company (A Florida Limited Lia	bility Company)	
The Articles of Organization for this Limited Liability Company w	vere filed onApril 28, 2010	and assigned
Florida document numberL10000045780		
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liabili	ity aamaany haras	THE WILL SHARE
as a semanding name, effect the new name of the infliced habit	ty Company neie.	AND IN
The new name must be distinguishable and end with the words "Limited" L.L.C."	d Liability Company," the designation	"LLG" or the abbreviation
Enter new principal offices address, if applicable:	1419 Jensen Beach Blvd.	
(Principal office address MUST BE A STREET ADDRESS)	Jensen Beach , FL 34957	
	1	,
Enter new mailing address, if applicable:	1419 Jensen Beach Blvd.	
(Mailing address MAY BE A POST OFFICE BOX)	Jensen Beach, FL 34957	
·		
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our records, <u>enter</u>	the name of the new
	į	
Name of New Registered Agent:		
New Registered Office Address:		
Apply to the supplier with the control of the supplier to the	Enter Florida street ac	ddress .
	. 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

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager of Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	Michael M. Mullen Jr.	5124 Frienship Avenue Pittsburgh, PA 15224	Add Remove
MGRM	John Mellaci	1419 Jensen Beach Blvd. Jensen Beach, FL 34957	_XX Add Remove
The state of the s	-		Add - Remove
			Remove T
	· .	(n) (n) (n)	Add Remove
D. If amendir	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
		1	_
• :	,	*	— ' —
Dated	June 8 , · 2010		
	Signature of a member of	r authorized representative of a member	
†a`		ac1 printed name of signee	

Page 2 of 2

Filing Fee: \$25.00