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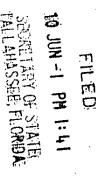
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COVER LETTER

Registration Section

TO:

Division	of Corporations					
SUBJECT:	950	PENN LLC				
	Name of Limited Liability Company					
The enclosed Art	icles of Amendment and fee(s) are sui	bmitted for filing.				
Please return all	correspondence concerning this matter	r to the following:				
		·				
		ETHEM GUNGOR				
Name of Person						
	GC CONSULTANTS					
	Firm/Company					
	444 MADISON AVENUE, SUITE 1206					
	Address					
	NEW YORK, NY 10022					
	City/State and Zip Code					
	egur	ngor@gcconsultants.com				
	E-mail address: (to be used for future annual report notification)					
For further inform	nation concerning this matter, please	call:				
	ETHEM GUNGOR	210 . 310 0	311 Ext.16			
	Name of Person	at (212) 310 93 Area Code & Daytime Te				
Enclosed is a che	ck for the following amount:					
25.00 Filing		\$55.00 Filing Fee &	\$60.00 Filing Fee,			
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy			
1			(additional copy is enclosed)			
	MAILING ADDRESS:	STREET/COURIER	ADDDESS.			
	Registration Section	Registration Section				
	Division of Corporations P.O. Box 6327	Division of Corporation Clifton Building	ons			
	Tallahassee, FL 32314	2661 Executive Center				
		Tallahassee, FL 32301				

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILEC

10 JUN -1 PM 1:41 950 PENN LLC (Name of the Limited Liability Company as it now appears on our records,)
(A Florida Limited Liability Company) May 12, 2010 The Articles of Organization for this Limited Liability Company were filed on _ L10000050078 Florida document number __ This amendment is submitted to amend the following: 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 "Limited Liability Company," the designation "LLC" or the abbreviation Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: 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 Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ETHEM GUNGOR	444 MADISON AVENUE, SUITE 1206 NEW YORK, NY 10022	Add Remove
			☐ Add ☐ Remove
			Add Remove
D. If amendi	ing any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	1- NU 01
-			PICED N-1 PM 1
Dated	MAY 17, , 201	10	A L
	ET	authorized representative of a member HEM GUNGOR	
	Typed o	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00