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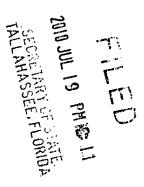
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C. LEWIS

JUL 2 0 2010

EXAMINER

COVER LETTER

TO: Régistration Section Division of Corporations
The second secon
SUBJECT: 1AKE AWAY MY +imeShere - LCC Name of Limited Liability Company
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
William Rodrigues Name of Person
TAKE Away my timeshere LCC Firm/Company
6000 Metrowest Blud Suite 205
Orlands FC 32835 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
William Rechistre at (407) 296-5572 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \times \text{S30.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{\$\text{Certified Copy (additional copy is enclosed)}} \text{\$\text{Certified Copy (additional copy is enclosed)}} \text{\$\text{Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\text{Certified Copy (additional copy is enclosed)}}} \text{\$\text{\$\text{\$\text{Certified Copy (additional copy is enclosed)}}} \$\text{\$\tex

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

FILED

2010 JUL 19 PH & 1.1 the Shre CCC
ed Liability Company as it now appears on our records.) TARY
(A Florida Limited Liability Company)
TALLAHASSEE The Articles of Organization for this Limited Liability Company were filed on _______S/10/2010 and assigned Florida document number L10000 5 5226. 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 "L.L.C." Enter new principal offices address, if applicable: 6000 netrowest Bluck (Principal office address MUST BE A STREET ADDRESS) MICHOLO FL 32835 BO. BAN . 3188 Enter new mailing address, if applicable: Orlando FC 32802 (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

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.

City

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

Title	Name	Address	Type of Action
MGR	AMER SOLHEAN	5271 IMAGE CIT SUITE 308 Kissinner FL 34746	□ Add ☑ Remove
MGRM	DANTEL Johnston	11 LANTON Street 12000000000000000000000000000000000000	Add Remove
			Add Remove
			Add Remove
			Add Remove
 .			Add Remove
D. If amend	ling any other information, enter cha	nge(s) here: (Attach additional sheets, if necessary.)	– 2:
		TALLAHA SSEE	1 T
Dated	7/16 , 2	<u>010</u> .	10 PRO II
	_	ber or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00