L100000051507

(Requestor's Name)		
(Address)		
(Address)		
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PICK-UP WAIT MAIL		
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(Document Number)		
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Special Instructions to Filing Officer:		
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TALLAHASSEE, FLORIS

011 JAN 28 PM 3:

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: CPC Group LLC 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:		
Charles W Marler Name of Person	201 TAL	
CBC Group UC Firm/Company	2011 JAN 28 PM 3: SECRETARY OF STATALLAHASSEE.FLOI	
775 Kirkman Rd Suite IK	\simeq \hookrightarrow \hookrightarrow	
Or lando FL 32811 City/State and Zip Code	>- 26 to 69	
E-mail address: (to be used for future annual report notification)	<u>4</u>	
For further information concerning this matter, please call:		
Name of Person at (407) 404 4434 Area Code & Daytime Telephone Numb	<u></u> er	
Enclosed is a check for the following amount:		
Certificate of Status Certified Copy Certific (additional copy is enclosed) Certific	Filing Fee, cate of Status & ed Copy onal copy is enclose	ed)

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

	D LLC	
(<u>Name of the Limited Lia</u> (A Flo	ability Company as it now appears on our records. orida Limited Liability Company)	2)
The Articles of Organization for this Limited Liabi		and assigned
Florida document number L1000005150		
This amendment is submitted to amend the following	ng:	201 TAL
A. If amending name, enter the new name of the	e limited liability company here:	LANGE
		ဟ _င ္း N
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the designation	on "LLG" or the Sobreviation
Enter new principal offices address, if applicable	ę:	<u> </u>
(Principal office address MUST BE A STREET A	(DDRESS)	3 3 B
(Mailing address MAY BE A POST OFFICE BO) B. If amending the registered agent and/or a registered agent and/or the new registered office	registered office address on our records, ent	ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street	address
_	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Regi	stered Agent:	
I hereby accept the appointment as registered at the provisions of all statutes relative to the prop accept the obligations of my position as register being filed to merely reflect a change in the regi company has been notified in writing of this cha	ver and complete performance of my duties, an red agent as provided for in Chapter 608, F.S. istered office address, I hereby confirm that th	d I am familiar with and Or, if this document is

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 or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>ngrm</u>	Charles wh	Marter Jr 1001 Harmony Common #2	Remove
<u> </u>			Add Remove
	<u>.</u>		☐ Add P☐ Remove
			HAS Remove
			Addı Addı Addı Reffiove
			Add Remove
D. If an	nending any other information	n, enter change(s) here: (Attach additional sheets,	if necessary.)
Dated	January 27th	ure of a member or authorized representative of a memb	ner .
	Jigilali	Charles Marker Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00