## 2/0000056792

(Re	questor's Name)				
(Ad	dress)	<u> </u>			
(Ad	ldress)				
(Cit	tγ/State/Zip/Phone	· #)			
PICK-UP	WAIT	MAIL.			
(Bu	isiness Entity Nam	ne)			
(Do	ocument Number)				
Certified Copies	Certificates of Status				
Special Instructions to	Filing Officer:				
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	MAY 30	2011			

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## **COVER LETTER**

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

(Name of the Limited Lie (A Fig.	Tec	hnolog	y Gr	DUP	LLC
The Articles of Organization for this Limited Liabi  Florida document number	lity Company were	filed on 5/	26/10	and assi	gned
This amendment is submitted to amend the following	ng:	•			
A. If amending name, enter the new name of th	e limited liability c	ompany here:			
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Lis	ability Company," the	e designation "L	,	bbreviation
Enter new principal offices address, if applicable	le:			至	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>		SSR C	)
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO				CONDITION OF THE PROPERTY OF T	
B. If amending the registered agent and/or registered agent and/or the new registered offic		ddress on our re	cords, <u>enter t</u>	he name o	f the new
Name of New Registered Agent:	Daw	n Mar	ie Bo		1. 100
New Registered Office Address:	<u>5342</u>	Clark	Kooa	Sui	<u>te</u> 190
	Sarasi	sta	rida street addi , Florida	342	33
	City	V		Zip Code	!
New Registered Agent's Signature, if changing Reg	istered Agent:				
I hereby accept the appointment as registered a the provisions of all statutes relative to the pro- accept the obligations of my position as registe	per and complete p	performance of my	duties, and I a	ım familiar	with and

If Changing Registered Agent, Signature of New Registered Agent

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 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 Address **Type of Action Title** Name □ Add Remove ☐ Add Remove ☐ Add Remove ∏Add Remove ∏Add <u>→</u> SRemove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary. Signature of a member or authorized representative o Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00