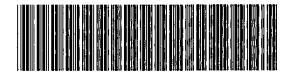
L10000057415

(Requestor's Name)					
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(0)	- 101-1-17: (DI	40			
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	WAIT	MAIL			
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Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
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SECRETARY OF STATE

J. SAULSBERRY EXAMINER AUG 18 2011

COVER LETTER

TO: Registration Sec Division of Corp					
SUBJECT:	MJE MAN	AGEMENT, LLC		•	
	Name of Limi	ted Liability Company			
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspon	idence concerning this matter	to the following:			
		Jackson L. Munsey			
		Name of Person			
	M.B.O. MAR	KETING AND RESEARCH,	LLC		
		Firm/Company		•	
2424 North Atlantic Avenue				75 2	
		Address			
	Dav	tona Beach, FL 32118		2011 AUG 16 SECRETARY FALLAHASSEE	רוד
City/State and Zip Code				16 SSE	
	jn	nunsey@usatitle.com		AH E. FL	بنيا
	E-mail address: (to be used for future annual report notifica	ntion)	H 9:	<u> </u>
For further information co	ncerning this matter, please o	all:		RIDA RIDA	***************************************
Kathryn A.	Vaughan, Esquire	at (386) 6	73-6733		
Name of	Person	Aren Code & Daytime	Telephone Number		
Enclosed is a check for the	following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee &	\$55.00 Filing Fee &	\$60.00 Filing	z Fee.	
¥ 323.00 1 milg 1 00	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate Certified C	of Status &	

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

MJ (<u>Name of the Limited</u> (A	E MANAGE Liability Compan Florida Limited L	MENT, LLC by as it now apper iability Company)	ars on our records.)		
The Articles of Organization for this Limited Liability Company were filed onMay 27, 2010 and ass Florida document number L10000057415					
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liab	ility company h	ere:		
	n/a				<u>. </u>
The new name must be distinguishable and end with "L.L.C."	the words "Limit	ted Liability Com	pany," the designation "L	LC" or the abbrevia	ition
Enter new principal offices address, if applicable:		n/a		<u> </u>	_
(Principal office address MUST BE A STREE	TADDRESS)			L'A Ecc	
		· · · · · · · · · · · · · · · · · · ·		HAH	_ 7
				SEE SEE	
Enter new mailing address, if applicable:	n/a		mq.	غىلىما 1	
(Mailing address MAY BE A POST OFFICE BOX)				(C)	
Muning unaress MAT DE ATOM OFFICE I			- 유규 · ·	<u></u>	
				DIM: +:	
B. If amending the registered agent and/or the new registered of			our records, enter t	he name of the	new
Name of New Registered Agent:	n/a				_
New Registered Office Address:	n/a				
		Enter Florida street address			
		n/a	, 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 or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Title <u>Name</u> <u>Address</u> Type of Action MGRM MARSHA G. MADORSKY 2424 North Atlantic Avenue Daytona Beach, FL 32118 ✓ Add Remove DARYL L BUSH MGRM 2424 North Atlantic Avenue, DbA 🗖 Daytona Beach, FL 32118 ✓ Remove ☐ Add Remove Add Remove Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) August 8 Dated_ Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00