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2011 APR 29 PM 1: 38

T. CLINE

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**EXAMINER** 

## **COVER LETTER**

TO:	Registration Sec Division of Corp					
SUBJE	CT. CO	RPORATE GOVE	RNANCE SOLUTIONS	S. LLC		
SOBIL			ited Liability Company			
The en	closed Articles of A	mendment and fee(s) are sul	bmitted for filing.			
Please	return all correspon	dence concerning this matter	r to the following:			
		ROCI	HELLE FRIEDMAN WALK			
	Name of Person					
	CORPORATE GOVERNANCE SOLUTIONS, LLC		NS, LLC			
			Firm/Company			
2102 W.		PLATT STREET, SUITE 104				
			Address			
			TAMPA, FL 33606			
			City/State and Zip Code			
			VALK@CORPGOVERN.CO to be used for future annual report notifi			
For fur	ther information co	ncerning this matter, please of	•	neation)		
		IELLE WALK	at ( 813 )	351.0998	201 SE	
	Name of	Person	Area Code & Daytim	ne Telephone Number	2011 APR 29 SECRETAR'T ALLAHASSE	and the same of th
Enclose	ed is a check for the	following amount:			mic	
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	d) Certified C	grifes GESEtus &	
	Registrat Division P.O. Box	NG ADDRESS: ion Section of Corporations 6327 see, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CORPORATE GOVERNANCE SOLUTIONS, LLC

( <u>Name of the Limited</u> (A	Liability Compa Florida Limited I	ny as it now appear Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Lie Florida document numberL10000064		were filed on	JUNE 16, 2010	and assigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liab	ility company her	<u>'e</u> :	
CORPORATE (	GOVERNANC	CE SOLUTIONS	s, PUC	
The new name must be distinguishable and end with "L.L.C."				LLC" or the abbreviation
Enter new principal offices address, if applicable:		2102 W. PLA	TT STREET, SU	ITE 104
(Principal office address MUST BE A STREE	( ADDRESS)	TAMPA, FL		
		33606		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		2102 W. PLA TAMPA, FL	TT STREET, SUI	HE 70
		33606		ARY SSE
B. If amending the registered agent and/o registered agent and/or the new registered off			our records, <u>enter 1</u>	the Same of the dev
Name of New Registered Agent:		•		
New Registered Office Address:	2102 W. PL	ATT STREET,		<u> </u>
			ter Florida street ada	iress
		TAMPA	, Florida	33606
		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:

٠.,

	Manager I = Managing Member			
<u>Title</u>	Name	Address	Type of Action	<u>n</u>
			Add Remove	
	<del></del>		Add Remove	
			Add E. □ Remove	
D. If a	nending any other information, enter chang	(7	APR 29   CRETARY O	-
	ARTICLE III THE PURPOSE FOI	R WHICH THIS PROFESSIONAL LIMITED	7 <del>3</del> 1	-
		ED IS TO CONDUCT ANY AND ALL		נ
	LAWFUL BUSINESS, INCLUDING L	LEGAL SERVICES, CONSISTENT WITH		
	FLORIDA STATUTES SECTIONS 6	608 AND 621.	_	
Dated _	APRIL 26 ,,	<u>011                                   </u>		
	RNU	ell, member		
	_	er or authorized representative of a member		
	±	LLE FRIEDMAN WALK d or printed name of signee	<del></del>	

Page 2 of 2

Filing Fee: \$25.00