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| (Re | equestor's Name) | | | |
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| PICK-UP | ☐ WAIT | MAIL | | |
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| Certified Copies | _ Certificates | of Status | | |
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TABLEANASSEE, FLORIDA

AECEIVED

B. KOHR

JUL - 8 2010

EXAMINER

10 JUL -8 PM 3-02



ACCOUNT NO. : I2000000195

REFERENCE: 440660 4336650

AUTHORIZATION :

COST LIMIT

ORDER DATE : July 8, 2010

ORDER TIME : 10:49 AM

ORDER NO. : 440660-005

CUSTOMER NO: 4336650

DOMESTIC AMENDMENT FILING

NAME: PROJECT 308, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___ CERTIFIED COPY XX PLAIN STAMPED COPY

_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER'S INITIALS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| PR(| DJECT 308, LLC | | . ~ |
|---|---|---------------------------------------|-----------------|
| (Name of the Limited Liability (A Florida | ty Company as it now appears or Limited Liability Company) | our records. | 3 |
| The Articles of Organization for this Limited Liability | Company were filed on | and | assigned |
| Florida document numberL10000065800 | _ | | |
| This amendment is submitted to amend the following: | | t | |
| A. If amending name, <u>enter the new name of the lin</u> | nited liability company here: | | |
| The new name must be distinguishable and end with the we "L.L.C." | ords "Limited Liability Company," | ' the designation "LLC" or the | ne abbreviation |
| Enter new principal offices address, if applicable: | - | | |
| (Principal office address MUST BE A STREET ADD | | <u> </u> | |
| | | | |
| Enter new mailing address, if applicable: | | | |
| Mailing address MAY BE A POST OFFICE BOX) | | | |
| | | · · · · · · · · · · · · · · · · · · · | |
| B. If amending the registered agent and/or regi registered agent and/or the new registered office ad | | records, enter the name | of the new |
| | | · | · |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | Futor | Florida street address | |
| | Enter | | |
| | | , Florida | . 7. |
| | Citv | Zip C | rae |

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 | Name | Address | Type of Action |
|-------------|----------------------------------|---|----------------|
| MGR | DENA GABRIELSON | 1438 Juliet Avenue St. Paul_MN 55105 | Add Z Remove |
| <u>MGR</u> | DENA BUCKSA | 1438 Juliet Avenue St. Paul. MN 55105 | Add Remove |
| | | | Add Remove |
| D. If amend | ling any other information, ente | r change(s) here: (Attach additional sheets, if necessary.) | <u>.</u> |
| | | | |
| | | , | _ _ |
| Dated | June 24 | <u>2010</u> . 2 | |
| | Signature of a | member or authorized representative of a member | |
| | | Megan Renze | |
| | | Typed or printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00