Division of Corporations Electronic Filing Cover Sheet

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From:

Account Name ; NORTON, HAMMERSLEY, LOPEZ & SKOKOS, P.A.

Account Number: I20010000202 Phone

: (941)954-4691

Fax Number

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K. SALY EXAMINES OCT 222014

COVER LETTER

	vision of Corp			
SUBJECT:		North America LLC		
	***************************************	Name of Limi	ted Liability Company	
The enclose	d Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return	n all correspon	ndence concerning this matter t	to the following:	
		Mary Eileen Watson		
			Name of Person	
		Fulcrum North Amer	ica LLC	
			Firm/Company	
		1330 Orange Avenu	e #336	
			Address	
		Coronado, CA 9211	8	
		mowons@att not	City/State and Zip Code	
		mowcpa@att.net E-mail address: (to be used for future annual report noti	fication)
For further	information c	oncerning this matter, please co	all:	
Mary Eik	een Watso	on	619 522-0566	
Name of Person		at () Area Code Daytim	e Telephone Number	
E-14!-	- ahaala Caasi			
□ \$25.00		■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COUR) Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	on rations enter Circle	

H14000 246 6063

OCT-21-2014 16:41 H140002466063

NORTON HAMMERSLEY

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

P.03/05 2014 OCT 21 AM 11:31 Sout Any 1

Fulcrum North America LL	С		ALLAHASSEE, FLORIDA
(Name of the Limi	ted Liability Compa (A Florida Limited I	ny as it now appears on Liability Company)	our records.)
The Articles of Organization for this Limited L Florida document number <u>L10000013</u>	iability Company 38 3テ	were filed on <u>Jul</u>	4 13, 3010 and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
The new name must be distinguishable and end with the	words "Limited Liab	oility Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	Mary E. Watson	n/ Fulcrum North America LLC
(Principal office address MUST BE A STREE		1330 Orange Avenue Suite 336	
		Coronado, CA	92118
Enter new mailing address, if applicable:		Fulcrum North	America LLC
(Mailing address MAY BE A POST OFFICE	BOX)	1330 Orange Ave, Suite 336	
		Coronado, CA	92118
B. If amending the registered agent and registered agent and/or the new registered of	ffice address her	<u>e</u> :	r records, enter the name of the ne
Name of New Registered Agent:		<u> </u>	antifordiby, Lopoz & Onones 171
New Registered Office Address:	1819 Main	Street, Suite 610 Enter Florida:	
		Enter Pioriaa	•
	Sarasota	City	, Florida <u>34236</u> <i>Zip Code</i>
New Registered Agent's Signature, if changing	Registered Agents	•	
I hereby accept the appointment as register provisions of all statutes relative to the pro- accept the obligations of my position as reg- being filed to merely reflect a change in the	ed agent and agr per and complete istered agent as registered office	ree to act in this cap performance of my provided for in Cha addrgss, I hereby c	duties, and I am familiar with and pter 605, F.S. Or, if this document is only that the limited liability

company has been notified in writing of this change.

Page 1 of 3

OCT-21-2014 15:42 NORTON HAMMERSLEY P. 04/05

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or

Authorized Member being added or removed from our records:

MGR ≃	Manager	
AMBR =	Authorized	Member

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	John Tyrus Daugherty	2916 Seasons Blvd	□ Ada
	·	Sarasota, FL 34240	В Кето∨е
MGR	Mary Eileen Watson	1330 Orange Ave, Suite 336	= Add
		Coronado, CA 92118	П Кеточе
			Add
			O Remove
			Add Remove
			□ Rémove
-			□ Add
			□ Rémove

	1-2014			
D.	If amen	ding an	y other	in

). If amending any other information, ex	iter change(s) here: (Attach a	dditional sheets, if necessary.)
		· · · · · · · · · · · · · · · · · · ·
Effective date, if other than the date of	f filing:	(optional)
the date this document is filed by the Florida De		
Dated October 20,	2014	
Mary Eileen /	otus.) re of a member or sutherized represen	
-	re of a member or suthorized represen	tistive of a member
Mary Eileen Watson		
	Typed or printed name of sig	T.86

Page 3 of 3
Filing Fee: \$25.00

