Division of Corporations
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Phone: (215)563-8113
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Corporate Filing Menu

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NOV -4 2010

EXAMINER

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SC&D BANNERMAN LLC

| (Name of the Limite | d Liability Compa A Florida Limited | ury as it now appear Liability Company) | on our records.) | The s | |
|---|--|--|-----------------------------|-------------------------|--|
| The Articles of Organization for this Limited | Liability Company | v were filed on | July 22, 2010 | and assigned. | |
| Florida document numberL1000007 | | | | | |
| This amendment is submitted to amend the fol | lowing: | | | | |
| A. If amending name, enter the new name | of the limited list | olity company ber | ği | | |
| The new name must be distinguishable and end w | ith the words "Lim | ited Liability Compar | ny," the designation "L | LC* or the abbreviation | |
| Enter new principal offices address, if applicable: | | 6676-1 Thoma | asville Road | | |
| (Principal office address MUST BE A STREET ADDRESS) | | Tallahassee, | FL 32312 | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | P.O. Box 3304 Atlantic Beach | | ****** | |
| 3. If amending the registered agent and registered agent and/or the new registered of | | | our records, <u>enter (</u> | he name of the new | |
| Name of New Registered Agent: | W. Bradley | Munroe, Esquir | e | | |
| New Registered Office Address: | 239 E. Virginia Street | | | | |
| | | Enter Florida street address | | | |
| | Ŧ | allahassee | , Florida | 32301 | |
| | | City | | Zip Code | |
| lew Registered Agent's Signature, if changing | Registered Agent: | • | | | |

Page 1 of 2

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.

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If Changing Registered Agent, Sign

MGR - Manager

(((H10000238595 3)))

If smeading 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:

| MGRM - M | maging Member | 1 | | |
|---------------|--|--|--|--------|
| Title | Name | Address | Type of Ac | tion . |
| | | | Add Remove | |
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| , | | | Add | |
| | | | Add Remove | |
| D. If amendin | g any other information, enter | r change(s) here: (Attack additional sheets, if necessary.) | 10 NOV -3 SECRETARY | 73 |
| Dated | October 27 | 2010 | 10 NOV -3 AM 7:54 SECRETARY OF STATE FALL AHASSEE, ILORIDA | |
| _ | Signature of a | member or authorized representative of a member Eleanor Vaida Gerhards Typed or printed name of signee | | |

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