Electronic Filing Cover Sheet

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(((11120002168733)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : SWART BAUMRUK & COMPANY, LLP

Account Number : I20000000291 : (407)847-7466 : (407)847-6641 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email	Address:		

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN STRATEGIC SOLUTIONS PARTNERS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
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K. SALY EXAMINER

SEP - 4 2012

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## COVER LETTER

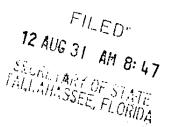
TO:	Registration Se Division of Cor			
SUBJI	ECT:	Strategic Solu	utions Partners, LLC	;
		Name of Limi	ted Liability Company	
The en	oclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
			Candy McDonah	
			THUSAN OF ECONAL	
		Swart	Baumruk & Company L	<u>LP</u>
			Firm/Company	
1101 Miranda Lane				
Address				
		к	lissimmee, FL 34741	
			City/State and Zip Code	
		F-mail address (	axes@sbc-cpa.com to be used for future annual report	notification)
For fu	rther information co	oncerning this matter, please o		
	Can	dy McDonah	at ( 407 )	847-7466
	Nаше о			aytime Telephone Number
Enclos	sed is a check for th	e following amount:		
\$25	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc.)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section of Corporations ox 6327	Registration S Division of Co Clifton Buildi	orporations ug
	Tallaha	ssee, FL 32314	2661 Executiv	ve Center Circle

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Tallahassee, FL 32301

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## ARTICLES OF AMENDMENT



ART		RGANIZATI	ON	SELAN SELAN		
	O	F		SECRETARY OF ST TALLAHASSEE, FLO		
Strat	egic Solution	ns Partners, L	LC			
(Name of the Limite	d Liability Compa A Florida Limited I	ny as It now appear Liability Company)	s on our records.)			
The Articles of Organization for this Limited I	Liability Company	were filed on	8/18/2010	and assigned		
Florida document numberL1000008	6575					
This amendment is submitted to amend the fol	lowing:					
A. If amending name, enter the new name of	of the limited liab	ility company her	<b>:</b> :			
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	ited Liability Compa	ny," the designation	"LLC" or the abbreviation		
Enter new principal offices address, if appli	cable:	4355 Wagony	vheel Road	·		
(Principal office address MUST BE A STREET ADDRESS)		Edmond, OK 73034				
Enter new mailing address, if applicable:		4355 Wagony	vheel Road			
(Malling address MAY BE A POST OFFICE				Edmond, OK 73034		
	<del></del>					
B. If amending the registered agent and registered agent and/or the new registered of			ur records, <u>enter</u>	the name of the new		
Name of New Registered Agent:	Swart Baun	nruk & Compan	LLP			
New Registered Office Address:	1101 Miran					
		Eni	er Florida street ad	ddress		
	<u>_</u>	Kissimmee	, Florida _	34741		
		City		Zip Code		

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

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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

<u>Title</u>	Name	Address	Type of Action
MGRM	Gary R. Grimes	2295 Lea Drive Saint Cloud, El. 34771	Add  Remove
			Add Remove
	<del></del>		Add Remove
<del></del>			Add Remove
			Add Remove
		· · · · · · · · · · · · · · · · · · ·	Add Remove
D. If amen	ding any other information,	, enter change(s) here: (Attach additional sheets, if necessa	) 
_			
Dated	August 29		
	Signatur	re of a member or authorized representative of a member	
	~	Gregg A. Hostetler	
	· · · · · · · · · · · · · · · · · · ·	Typed or printed name of signee	

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