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S. HAWKES

SEP 2 8 2010

EXAMINER

DIVISION OF CO	грогасиодз		•
SUBJECT:	LOO	K 4G, LLC	
	Name of Limit	ed Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	KYLE	CHARLES YOUNG, ESQ Name of Person	
		Name of Person	
	KYLE	CHARLES YOUNG, PL Firm/Company	
	205	5 Worth Avenue, #201	
	Pá	alm Beach, FL 33480	
•		City/State and Zip Code	
	E-mail address: (to	kcy@lawyer.com be used for future annual report notificat	ion)
For further information	concerning this matter, please ca	ill:	
KYLE CHA Name	ARLES YOUNG, ESQ of Person	at (<u>561)</u> 63 Area Code & Daytime To	35-1114 elephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Registration Section

TO:

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	G, LLC ny as it now appear iability Company)	s on our records.)	
(A Florida Edilited I	ciability Company)		
The Articles of Organization for this Limited Liability Company	were filed on	8/19/2010	and assigned
Florida document number <u>L10000087251</u> .			10 SE
This amendment is submitted to amend the following:			22
A. If amending name, enter the new name of the limited liab	ility company here	#	10 SEP 27 PM 12: 1
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Compar	y," the designation "L	or the abbreviation
Enter new principal offices address, if applicable:	900 OSCEOL	A DRIVE	
(Principal office address MUST BE A STREET ADDRESS)	SUITE 222B		
•	WEST PALM	BEACH, FL 3340	9
Enter new mailing address, if applicable:	900 OSCEOLA	DRIVE	
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 222B		
	WEST PALM	BEACH, FL 33409	9
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	fice address on ou e:	ur records, <u>enter ti</u>	ne name of the new
Name of New Registered Agent:			
New Registered Office Address:	Fud	w Florida streat al-l	ACC .
	Enter Florida street address		
	, Florida		7. 6.1
	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.

•	or-Managing Member being added or removed from our records:						
	MGR = Mana	GR = Manager GRM = Managing Member					
	<u>Title</u>	Name	Address	Type of Action			
	MGRM	BLAKE E LADENHEM	2000 TOWERSIDE TER APT 1001 MIAMI FL 33133-8 PB	Add Remove			
				Add Remove			
			CONT.	Add Remove			
				Add Rentidive			
				Nddd □Remove			
				Add Remove			
		EIN# 80 - 0642783	s) here: (Attach additional sheets, if necessary.)				
				_			
4	Dated	September 19, 201	110 //	_			
4	-	-	r authorized representative of a member ARLES YOUNG, ESQ r printed name of signee				
+) gated	: Seplenber 19,70					