

L10000090544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

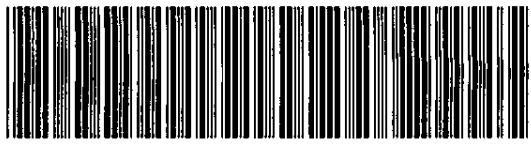
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300199790433

04/04/11--01026--015 **25.00

FILED
2011 APR 18 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER
APR 19 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GSA SALES CONSULTANTS LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARK MARTUKOVICH
Name of Person

Firm/Company

1862 SPRINGWOOD CIR. S
Address

CLEARWATER, FL 33763
City/State and Zip Code

MARK@NETMARKINC.COM
E-mail address: (to be used for future annual report notification)

FILED
2011 APR 18 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

MARK MARTUKOVICH at (813) 404-4382
Name of Person Area Code & Daytime Telephone 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)

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

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

GSA SALES CONSULTANTS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 8/30/10 and assigned
Florida document number L10000090544.

FILED
2011 APR 18 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

MAV HOLDINGS LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" on the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1862 SPRINGWOOD CIR S.
CLEARWATER, FL 33763

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1862 SPRINGWOOD CIR S.
CLEARWATER, FL 33763

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

MARK MARTUKOVICH (NO CHANGE)

New Registered Office Address:

1862 SPRINGWOOD CIR S.

Enter Florida street address

CLEARWATER

, Florida

33763

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.

MM
If Changing Registered Agent, Signature of New Registered Agent
= NOT NEW

Page 1 of 2

DID NOT CHANGE NAME OF
AGENT ONLY THE ADDRESS!

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:

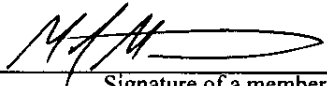
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ROSE SAPIENZA	1862 SPRINGWOOD CIR S CLEARWATER, FL 33763	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

2011 APR 18 PM 3:09
 FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Dated 3/31, 2011.



 Signature of a member or authorized representative of a member

MARK MARTUKOVICH

 Typed or printed name of signee