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SECRETARY OF STATE

COVER LETTER

| TO: | Registration Se Division of Cor | | | | | |
|----------------|-----------------------------------------|--------------------------------------------|------------------------------------------------------------------|----------------------------------------|-----------------------------------------------------------------------|--------------------|
| SUBJE | CT: | CIV Equ | ity Partners LLC | | | |
| | *************************************** | Name of Lim | ited Liability Company | | | |
| The end | closed Articles of | Amendment and fee(s) are sui | bmitted for filing. | | | O Vice |
| Please 1 | return all correspo | ndence concerning this matte | r to the following: | | | 12 HAR 15 PH 3: 54 |
| | | | Jeffrey Kahn | | | 15 Con 19 |
| | | | Name of Person | ······································ | *** * * * * * * * * * * * * * * * * * * | 7 GR |
| | | CIV | / Equitey Paratners LL | _C | | |
| | | • | Firm/Company | · · · · · · · · · · · · · · · · · · · | *************************************** | |
| | | | 527 NE 224th Street | | | |
| | | | Address | | | |
| | | W | ilton Manors, FI 3330 | 5 | | |
| | | | City/State and Zip Code | | | |
| | | F. mail addrage: (| jeff@jeffkahn.com to be used for future annual repo | art notification) | | |
| For furt | her information co | oncerning this matter, please of | • | ort notification) | | |
| | Je | effrey Kahn | at (_954_) | 445-6 | 6307 | |
| | Name of | Person | | Daytime Telepl | hone Number | |
| Enclose | d is a check for th | e following amount: | | | | |
| v \$25. | 00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is er | nclosed) | \$60.00 Filing F Certificate of Certified Cop (additional co | Status & |
| | | G. | | | | |

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

| <u> </u> | V Equity Partners LLC | | |
|------------------------------------------------------------|-----------------------------------------------------------------|---------------------------|-------------------------|
| (<u>Name of the Limited L</u> (A F | lability Company as it now appelorida Limited Liability Company | ars on our records. | 9 |
| V | | | \$ E |
| The Articles of Organization for this Limited Liab | oility Company were filed on | April 30, 2011 | and assigned |
| Florida document number L100001192 | <u>86</u> . | | N 15 F |
| This amendment is submitted to amend the follow | ring: | | STATION STATION |
| A. If amending name, enter the new name of t | he limited liability company he | ere: | 5 |
| | | | |
| The new name must be distinguishable and end with "L.L.C." | the words "Limited Liability Comp | pany," the designation "L | LC" or the abbreviation |
| Enter new principal offices address, if applicab | le: | | |
| (Principal office address MUST BE A STREET | ADDRESS) | | |
| | | | |
| | | | |
| Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE BO | <u> </u> | | |
| | | | |
| | | | |
| B. If amending the registered agent and/or | | our records, enter the | ne name of the new |
| registered agent and/or the new registered offic | <u>e address here</u> : | | |
| | | | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | Enter Florida street address | | |
| | . Florida | | |
| | 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.

If Changing Registered Agent, Signature of New Registered Agent

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 |
|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|----------------|
| MGR | Jan Rosak | 527 NE 24th Street Wilton Manors, FL 33305 | Add Remove |
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| | And the second of the second o | | Add Remove |
| D. If amend | ling any other information, ente | er change(s) here: (Attach additional sheets, if necessary.) | |
| ****** | | | _ |
| Dated | March 13 | ,2012 | |
| | | 1DU | |
| | Signature of | Jeffrey A Kahn | |
| | ************************************** | Typed or printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00