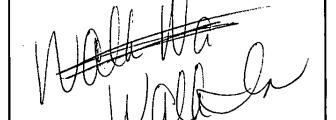
110000122607

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				



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J. SAULSBERRY EXAMINER

OCT 11 2012



ACCOUNT NO.	: 12000000195		
REFERENCE	: 364303 7806746	6	
AUTHORIZATION	: Spelle enan	ノ	
COST LIMIT	111		
ORDER DATE : 10-09-12			
ORDER TIME : 3:46 PM			
ORDER NO. : 364303-011			
CUSTOMER NO: 7806746			
NAME: EXISTENTIAL SO	FTWARE, LLC	2012 OCT 1 SECRETATI TALLAHASS	ton and
EFFECTIVE DATE:		TO AM	(marks
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCO	PRPORATION	Y 9: 43 STATE PLORIDA	t-m-
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:		
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STA	NDING		
CONTACT PERSON: Carina L. Dunl	ap EXT# 52951		
	EXAMINER'S INITIALS:		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EXISTENTIAL SOFTWARE, 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 11-29-2010 and assigned Florida document number L10000122607 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 332 Crystal Pond Ave, Deland, FL 32726 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 332 Crystal Pond Ave, Deland, FL 3272011c Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: (Enter Florida street address) (City)

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 = MGRM	Manager = Managing Member		
Title	<u>Name</u>	<u>Address</u>	Type of Action
			Remove
			Remove
			Remove
			D Remove
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			Remove
D. If am	ending any other information, enter ch	ange(s) here: (Attach additional sheets, if necess	ary.)
Dated	10/8///	nber or authorized representative of a member	ZELIZ DCT 10 AM 9: 43 SELIZE FARY OF STATETALLAMASSE TALLAMASSEE, FLORIDA
	Nathanio Thomas	ped or printed name of signee	
	•	Page 2 of 2	7 5 F
		Filing Fee: \$25.00	M 9: