Florida Department of State
Division of Corporations
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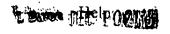
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TELE SQUAD LLC

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Corporate Filing Menu



## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	SQUAD LLC	
(Name of the Limited Limited (A Florid	lity Commany as it now appears on our records Limited Liability Company)	14r)
The Articles of Organization for this Limited Liability Florida document number L11000024834	y Company were filed on 02/28/2011	and assigned
This amendment is submitted to amond the following	;	13 13 14
A. If amending name, enter the new name of the li	Imited liability company here;	1 - 9 T C
The new name must be distinguishable and end with the value.	words "Limited Liability Company," the design	
Enter new principal offices address, if applicable:		20 C
(Trincipal office address MUST RE A STREET AD	DRESS)	0
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office a		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	reet address
		rida
	City	Zip Code

New Registered Agent's Stongture, if changing Registered Agent:

I haveby 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 Agant, Signature of New Registered Agent

If amending the Managers or Managing Membars 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> MGRM	Name BILAL H. KHAN	Address 200 PALM CIRCLE EAST	Type of Action  Add
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I amending any other information	n, enter change(s) here: (Attach additional sheets, if ne	cessary.)	
NOVEMBERA	F 2012		
NOVEMBER 2	5 2013 Jassyrthin		
Signa	nurs of a member or authorized representative of a member HASSAN H KHAN		
	Typed or printed name of signee	·	
•	Page 3 of 3	<del></del>	
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