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COVER LETTER

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

TO:

SUBJECT:	CHANNEL TREND LI	MITED LIABILITY C	OMPANY		
SCHOLECT:		nited Liability Company		-	
	es of Amendment and fee(s) are surespondence concerning this matter	_			
		Gene Lewis			
		Name of Person			
		Lewis & White PLC Firm/Company		11 OCT 19 SECRETAR ALLAHASS	
	-	222 W. Georgia Street			
		Address			
		Tallahassee FL 32301			
		City/State and Zip Code lawlaw@polaris.net		T.	
	E-mail address:	to be used for future annual report	t notification)	-	
For further informat	ion concerning this matter, please	call:			
	Gene Lewis	at (_ 850)	212-8271		
Na	ame of Person	Area Code & D	aytime Telephone Numb	per	
Enclosed is a check	for the following amount:				
\$25.00 Filing Fe	e \$30.00 Filing Fee & Certificate of Status	✓ \$55,00 Filing Fee & Certified Copy (additional copy is enc	Certific closed) Certific	Filing Fee, cate of Status & ed Copy onal copy is enc	
Re	AILING ADDRESS: egistration Section vision of Corporations	STREET/CO Registration S Division of C			

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CHANNEL TREND LIMITED LIABILITY COMPANY

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

(A Florida Limited I	Liability Company)		
The Articles of Organization for this Limited Liability Company	y were filed on	June 1, 2011	Tand assigned
Florida document number L11000064186 .			<i>Y</i>
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	bility company here	<u>e</u> :	
ChartMas	ter LLC		
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Compa	ny," the designation '	'LLC" or the abbreviation
Enter new principal offices address, if applicable:	4400 Northco	rp Parkway	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	Palm Beach C	Gardens, FL 334	10
Enter new mailing address, if applicable:	4400 Northco	rn Parkway	
(Mailing address MAY BE A POST OFFICE BOX)		Gardens, FL 334	10
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ur records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Ent	er Florida street ad	dress
		, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Ma MGRM = N	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			☐ Add
			Remove
			Add Remove
			
			Add Remove
			F7 15
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D. If amen	ding any other information,	enter change(s) here: (Attach additional	sheets, if necessary.)
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			ARCIARS
Dated	October 19		m E P
	Signatur	e of a member or authorized representative of a	i member 5 5
		Gene Lewis Typed or printed name of signee	Leur Der N

Page 2 of 2

Filing Fee: \$25.00