Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:		•		SECRETARY
	Division of Corporations			<u>~</u> ~.∞
	Fax Number	: (850)617-63	83	
From:				100 T 8
	Account Name	: THE LAW OFF	ICES OF NICK	SPRADLIN PLLC
	Account Numbe	r : 12007000002	0	0,41
	Phone	: (813)435-31	76 .	
	Fax Number	: (813)333-63	58	

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COURBET COVE, LLC

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H11000 2738133

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COURBET	COVE, LLC			
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our	r records.)		
(A Finish Diffice 1	lability Company)			
The Articles of Organization for this Limited Liability Company	were filed on09/27/20	11	and assig	gned
Florida document number <u>L11000110567</u> .				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
RBP INTERACTIVE, LLC		;	72. 12. 12.	
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Company," the	designation "L	C'Lor the ab	breviation
Enter new principal offices address, if applicable:	2860 SR 84		SSE B	5
(Principal office address MUST BE A STREET ADDRESS)	SUITE 116-189			
	FORT LAUDERDALE	. FL 33316		حالفوجيس المرابع المرابع
·			원년 22: 23: 23: 23: 23: 23: 23: 23: 23: 23:	
Enter new mailing address, if applicable:	2860 SR 84		≥. •	
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 116-189			
	FORT LAUDERDALE	 . FL 33316		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		ords, <u>enter ti</u>	ie name of	the new
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
		_, Florida		
	City		Zip Code	
Non-Designation of America Company of the material Designation of America				

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

Page 1 of 2

11/25/2029 04:18 FAX 8133336358 H 11000 273 813 3

MGR = Manager

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:

Title	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
······································			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter cha	nge(s) here: (Attach additional sheets, if nec	essary.) TALLAN SE CIT
			2011 NOV 18 AM SEGRETARY DES
Dated	1/17.2	011	1 8: 20 STATE LDRIDA
	1-7.	ber or authorized representative of a member	