L11000115572

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32 JUL 27 PM 1: 22
SECRETARY OF STATE

C. LEWIS

JUL 3 0 2012

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporation	,	4		- ***/			
SUBJI	asterior (*) Profes	The Wald	en Grou	p, L.L.C.				
30201		Name of Limi						
The en	closed Articles of Amendme	ent and fee(s) are sub	omitted for fi	ling.				
Please	return all correspondence co	oncerning this matter	to the follow	wing:				
			Samori I	K. Walden				
			Name	of Person		 -		
	The Walden Group, L.L.C.							
	Firm/Company							
	1341 NW 174 Street							
	Address							
	Miami, Fl. 33169							
	City/State and Zip Code							
	waldengroup.samori@att.net E-mail address: (to be used for future annual report notification)							
For fu	rther information concerning			Turne umum report no	,			
Samori K. Walden			at (_	786)	499-7814	wales and the state of the stat		
	Name of Person			Area Code & Dayti	me Telephone Nu	mber		
Enclos	sed is a check for the follow	ing amount:						
\$2:		00 Filing Fee & ertificate of Status	Cert) Filing Fee & ified Copy itional copy is enclose	Cert ed) Cert	Filing Fee, ificate of Status & ified Copy itional copy is enclosed)		

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

FILED

12 JUL 27 PM 1: 22 THE WALDEN GROUP, L.L.C. (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 OCTOBER 10, 2011 and assigned L11000115572 Florida document number 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." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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:

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

Name of New Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

Florida

Zip Code

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
MGRM	Christopher N. Wooter	6731 Johnson Street Apt. 308 Hollywood, Fl. 33024	Add Remove
			Add Remove
			C Domovo
***************************************			Add Remove
y			Demove
			□ Damasia
D. If amend	ding any other information, en	ter change(s) here: (Attach additional sheets	FILED FILED SECRITARY OF STATE
Dated	July 22	, 2012 .	
	Chris	opher n. Wooter	
	Signature o	f a/member or authorized representative of a men Christopher N. Wooten	1DEF
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00