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2011 NOV 30 AN II: 24-2
SECRETARY OF STATE?

T. HAMPTON

DEG - 1 2011

EXAMINER

COVER LETTER

	Registration Sec Division of Corp			
		US Biofuture Name of Limi		
SUBJE	CT:	Name of Limi	ted Liability Company	
The encl	osed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspor	ndence concerning this matter	to the following:	
		Marshall J.	isher Name of Person	
		U.S. Biofut	Firm/Company	
			Firm/Company	
		1608 75+	h St. W. Address	
				.
		Bradenton,	FL 34209 City/State and Zip Code bjo Qgmail. com to be used for future annual report notifical	
		Future of	City/State and Zip Code	
		E-mail address: (1	to be used for future annual report notifical	tion)
For furth	ner information co	oncerning this matter, please c		
	Name of	Person	at () Area Code & Daytime T	Celephone Number
				•
Enclose	d is a check for th	e following amount:		
\$25. 0	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional 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

,		2	011 NOV 30 AH 11: 24
- US Biotuture			SECRETARY OF STATE
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appe Limited Liability Company	ars on our records;)	ALLAHASSEE. FLORIDA
	Company were filed on		
This amendment is submitted to amend the following:	ted to amend the following: ter the new name of the limited liability company here: folione		
A. If amending name, enter the new name of the lin	nited liability company h	ere:	
U.S. Biofuture LLC			
The new name must be distinguishable and end with the we	ords "Limited Liability Com	pany," the designatio	n "LLC" or the abbreviation
"L.L.C."			
Enter new principal offices address, if applicable:			***************************************
(Principal office address MUST BE A STREET ADD	<u>PRESS)</u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			·
		<u></u>	
B. If amending the registered agent and/or regi		our records, ent	er the name of the new
Name of New Registered Agent:	, <u>, , , , , , , , , , , , , , , , , , </u>		
New Registered Office Address:	•		
	I	Enter Florida street	address
-		, 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 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

	<u>Name</u>	Address	Type of Actio
			Remove
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			Demove
			Add
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			DbA
			Remove
			Remove
f amen	ding any other information, ente	er change(s) here: (Attach additional she	rets, if necessary.)
_		·	2011 NOV 30 SECRETARY
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	 		AHII: 24 YOF STATE SEE FLORIDA
_			A
ed	November 22	, <u>2011</u> .	
	Murshal	A fuller a member or authorized representative of a m	
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Filing Fee: \$25.00