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Division of Corporations

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From:

Account Name : GASSMAN & ASSOCIATES, P.A.

Account Number : 075350000514

Phone : (727) 442-1200

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

-2012 JAN-26 AM 7: 42

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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(Name of the Limited Liability Company as it no (A Florida Limited Liability C	ompany)	<del></del>	
The Articles of Organization for this Limited Liability Company were file	d on12/16/2011	and assigned	
Florida document number L11000141345,			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability com	pany here:		
The new name must be distinguishable and end with the words "Limited Liabil"L.L.C."	ty Company," the designation	"LLC" or the abbreviation	
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 here:  Name of New Registered Agent:	ress on our records, <u>enter</u>		
New Registered Office Address:			
trew Academic Audies	Enter Florida street address		
·	, Florida		
City New Registered Agent's Signature, if changing Registered Agent:		Zip Code	
I hereby accept the appointment as registered agent and agree to act	in this capacitv. I further a	gree to comply with	
the provisions of all statutes relative to the proper and complete perfo	,		

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, 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> <u>Name</u> <u>Address</u> Type of Action MGR KALEBRA KELBY 333 DOUGLAS ROAD EAST OLDSMAR, FL. 34677 ✓ Add Remove ☐ Add Remove ☐ Add Remove Add Remove ∏Add Remove □Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **JANUARY 26** 2012 Dated . Signature of a member or authorized representative of a member ALAN S. GASSMAN, Authorized Representative Typed or printed name of signee

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Filing Fee: \$25.00