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(Re	questor's Name)	
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2012 JAN 31 AM 8: 52 SECRETARY OF STATE:

J. SAULSBERRY EXAMINER

FEB 2 2012

COVER LETTER

TO:	Registration Division of C					
SUBJE	ECT:	Ar	k Ora, LLC			
30201			nited Liability Company			
		of Amendment and fee(s) are su				
Please	return all corres	pondence concerning this matte	er to the following:			
			Sean Beshore Name of Person			
			Name of Person			
Ark Ora, LLC						
			Firm/Company			
1560-1 Newbury Rd						
			Address	•	2012 	
		Ne	ewbury Park, CA 91320		2012 JAN 3 SECRETAF	200
			City/State and Zip Code		131 ASSI	2343
		E-mail address:	sean@examed.org (to be used for future annual report no	tification)	AH COF S	1
For fur	ther information	concerning this matter, please	call:		M 8: 52 F STATE	٠.,
	S	Sean Beshore	at (_805)	5003119	→ * 10 	
	Name	of Person	Area Code & Dayt	ime Telephone Numbe	r	
Enclose	ed is a check for	the following amount:				
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclos	ed) Certified	ite of Status &	
	Regis Divis P.O.	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, FL 32314	STREET/COUI Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	oorations Center Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ark	Ora, LLC		<u>.</u>	
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears o ted Liability Company)	on our records.)		
·	• • •			
The Articles of Organization for this Limited Liability Comp	pany were filed on	01/01/12	and assigne	d
Florida document numberL11000142505				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	liability company here:			
	ommerce, LLC			
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Company.	" the designation	"LLC" or the abbre	viation
Enter new principal offices address, if applicable:				
• • •	~	· · · ·	-1: 2	
(Principal office address MUST BE A STREET ADDRES)	<u> </u>		7012 TALL	
			AFE A	-11
			AS 3	Co constant
Enter new mailing address, if applicable:			SER -	Daniel Land
(Mailing address MAY BE A POST OFFICE BOX)				
			09 A 86	
			52 10A	
B. If amending the registered agent and/or registered		records, enter	the name of the	e nev
registered agent and/or the new registered office address	<u>here</u> :			
Name of New Registered Agent:				
New Registered Office Address:			_	
	Enter	Florida street ad	ldress	
		, 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

MGRM = Managing Member **Type of Action** Title **Address** <u>Name</u> ☐ Add Remove ☐ Add Remove ☐ Add Remove ∏Add Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) January 27. Signature of a member of authorized representative of a member SEAN 156-1

Page 2 of 2

Filing Fee: \$25.00