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2012 JAN -9 FIT 35 32 SECRETARY OF STATE NAME AND SEE, FLORID!

C. LEWIS

JAN 1 0 2012

EXAMINER

	4	COVER	LETTER		₩;	N. 1941	* **
TO: Registration Section Division of Corpora		**	* ***	•	•		
SUBJECT: Acuit	ive, LLC				,· 		
	Name of L	imited Liability	company · · · ·				
The enclosed Articles of Ame	ndment and fee(s) are	submitted for fil	ing.				
Please return all corresponden	ice concerning this ma	tter to the follow	ing:				
_	Dan B	ernade	1.				
_	Acuthi	s VC	ompany			•	
•	3808 M	anteo	ompany o				
· <u>-</u>	Orland	o FP.	3283	S7 ,			
_	ban Ber E-mail addres	2) a le ses: (to be used for	(a) ac	t notification)	<u> </u>		
For further information conce	ming this matter, pleas	se call:					
Name of Pers	Bernad	at (_) Area Code & I	Daytime Telepl	ione Number		
Enclosed is a check for the fol	lowing amount:			•			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	s Certif	Filing Fee & ied Copy ional copy is en	closed)	Certified (of Status &	osed)

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

2012 JAN -9 PM :9: 32

Acuitive, LLC	SECRETARY OF STATE FALLAHASSEE.FLORIDA
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Com Florida document number 12 00000 680.	pany were filed on $01/03/2012$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	l liability company here:
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRES	
	·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	ed office address on our records, <u>enter the name of the new</u> s here:
Name of New Registered Agent:	
New Registered Office Address:	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 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 = N	Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action		
MGR	Dan Bernadel	380B Martes Cir Orlando Fl. 32837.	Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
·			Add Remove		
D. If amend		(s) here: (Attach additional sheets, if necessary.)			
			2012 JAN		
Dated	The	or authorized representative of a member	-9 PM & 32 A\$SEE. FLORIDA		
	DAN BERNADO		7		
Typed or printed name of signee					

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Filing Fee: \$25.00