## L12000002759

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EXAMINER



700215668187

DEPARTMENT OF STATE
12 JAN 27 AN IO: 50





ACCOUNT NO. : I2000000195 -

REFERENCE: 068579

7859597

AUTHORIZATION

COST LIMIT

ORDER DATE: January 23, 2012

ORDER TIME : 8:35 AM

ORDER NO. : 068579-011

CUSTOMER NO: 7859597

## DOMESTIC AMENDMENT FILING

NAME: COPTONIX, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Becky Peirce -- EXT# 2919

EXAMINER'S INITIALS:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

12 JH 27 PH 2: 34

	COPTONIX, LLC	•
(Nume of the Limited Lin (A Flo	bility Company as it now appears on our regrida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liabil	lity Company were filed on 01/06/2012	and assigned
Florida document number L12000002759		
This amendment is submitted to amend the following	ığ:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the	e words "Limited Liability Company," the de	signation "LLC" or the abbreviation
Enter new principal offices address, if applicable	;;	
Principal office address MUST BE A STREET A	***************************************	• • • • • • • • • • • • • • • • • • • •
	/4/1	
Enter new mailing address, if applicable:		
(Malling address MAY BE A POST OFFICE BOX	<u> </u>	
		200
B. If amending the registered agent and/or registered agent and/or the new registered office		is, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	NATURE OF THE PROPERTY OF THE	
	(Enter Florida street address)	
<u></u>	F	lorida(Zip Code)
	(Citv)	(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 = Managing Member

Title	Name	<u>Address</u>	Type of Action
MGR	YASAR CHANNAA	3821 AVALON PARK EAST HLVD APARTMENT #324 ORLANDO, FL 32828	_Ø Add _□ Romove
			_□ Add _□ Remove —
**************************************			_CI Add _CI Remove —
	VI		_O Add _O Remove _
<b>~</b>			
	PVA. LL WILD AND AND AND AND AND AND AND AND AND AN		
D. If amendin	g 2ny other information, enter change	(s) here: (Attach additional sheets, if necessary.)	_
			· -
			<del>-</del> -
Dated <i>Q.1</i>	125/2012 Bestive	Constantial Cambridge Camb	··-
	/ YAS	SAR CHANNAA of printed name of signee	

Page 2 of 2

Filing Fee: \$25.00