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COVER LETTER

. TO:

то:	Registration Section Division of Corpo			u,
SUBJE	· :CT:	Strategic Cal	lling Solutions, LLC	
50001			ted Liability Company	
The end	closed Articles of Ar	nendment and fee(s) are sub	mitted for filing.	
Please	return all correspond	ence concerning this matter	to the following:	
	Michael A. Frieder, President Name of Person		nt	
		Strate	gic Calling Solutions, Ll	LC
Firm/		Firm/Company		
1114 Th		Thomasville Rd., Ste.	<u>J</u>	
			Address	
		Т	allahassee, FL 32303 City/State and Zip Code	
		agei	nt@on-callsupport.com	
		E-mail address: (t	o be used for future annual report	notification)
For fur	ther information con	cerning this matter, please c	all:	
		el A. Frieder	at (_850_)	224-1008 aytime Telephone Number
	Name of P	erson	Area Code & Da	lytime Telephone Number
Enclose	ed is a check for the	following amount:		
\$25	5,00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc.)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registrat Division P.O. Box	G ADDRESS: ion Section of Corporations 6327 ee, FL 32314	Registration S Division of Co Clifton Buildi	orporations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Strategic C	alling Solutions, LLC						
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)						
The Articles of Organization for this Limited Liability Company were filed on January 6, 2012 and assigned Florida document number L12000003607							
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the limit	ted liability company here:						
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Company," the designation "LLC" or the abbreviation						
Enter new principal offices address, if applicable:							
(Principal office address MUST BE A STREET ADDR	ESS)						
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address and/or the new registered agent and/or	ered office address on our records, enter the name of the new ress here:						
Name of New Registered Agent:							
New Registered Office Address:	SECTION TO						
	Enter Florida street autress						
	City Mo Zip Sode T						
New Registered Agent's Signature, if changing Registered	RZ :,						
the provisions of all statutes relative to the proper an accept the obligations of my position as registered ag	and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with and gent as provided for in Chapter 608, F.S. Or, if this document is ad office address, I hereby confirm that the limited liability						

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> Address **Type of Action** William Earl Bassett, Jr. 1114 Thomasville Rd. ✓ Add Remove Tallahassee, FL 32303. $\prod Add$ ☐ Remove ☐ Add ☐ Remove ∏Add Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) April 24 2012 Dated Signature of a member or authorized representative of a member Michael A. Frieder, President

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee