## L/20000/1628

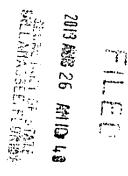
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## **COVER LETTER**

TO: Registration So 'Division' of Co						
Studioflu	JX LLC					
SUBJECT:	Name of Limit	ed Liability Company		•		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				,
Please return all correspondent	ondence concerning this matter	to the following:				
	Corey A Morrison					•
		Name of Person		_		
	Studioflux LLC	•				
		Firm/Company		77	2013	
	1614 SW 28th St				2013 城市 2	4 15 15 15 15 15 15 15 15 15 15 15 15 15
		Address	<del></del>	—1.0 型。 (数二) (可)	മ	
	Cape Coral, FL 339	14		- 1 J	81 O HV	And the second
,	corey@studioflux.com	City/State and Zip Code n		35.17.	69 F	
	E-mail address: (t	o be used for future annual report notificat	ion)	-		
For further information	concerning this matter, please c	all:				
Corey A Morrison		239 339-7247				
Name o	of Person	at ()Area Code & Daytime Te	elephone Numb	per	_	
Enclosed is a check for t	the following amount:					
\$25.00 Filing Fee	■\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifi	Filing Fe cate of S ed Copy onal cop	tatus &	
MAII	ING ADDRESS:	STREET/COURIER	: ADDRESS:			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Studioflux LLC (Name of the Limited )	Liability Compar	ny as it now appears on our reco	ords.)			
(A	Florida Limited L	ny as it now appears on our reco iability Company)				
The Articles of Organization for this Limited Liability Company were filed on  L12000011628  Florida document number				_ and assigned		
This amendment is submitted to amend the follo	wing:					
A. If amending name, <u>enter the new name of</u>	the limited liab	ility company here:				
The new name must be distinguishable and end with L.L.C."	the words "Limit	ted Liability Company," the desig	nation <u>"L</u> LC	"නු the	e abbrevia	
Enter new principal offices address, if applicable:		Studioflux LLC	<u> </u>	器	4	
Principal office address MUST BE A STREET		1614 SW 28TH STREE	T S	92	-	
		Cape Coral, FL 33914		¥	(1)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Studioflux LLC	4.20 pr 17 d / 4 18 d / 4 18 d / 4	1 te	<u> </u>	
		1614 SW 28TH STREE	T			
		Cape Coral, FL 33914				
B. If amending the registered agent and/o egistered agent and/or the new registered off  Name of New Registered Agent:		<b>2:</b>	enter the	name	of the	
•	1614 SW 28TH STREET					
New Registered Office Address:		Enter Florida si	treet addres	'S		
	Cape Coral		3391	14		
	Oupo Colui	. Fla	orida "			

If Changing Registered Agent, Signature of New 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
PCEO	Corey A Morrison	1614 SW 28TH STREET	Add
		Cape Coral, FL 33914	Remove
MGR	Corey A Morrison	1614 SW 28TH STREET	Add
		Cape Coral, FL 33914	Remove
MGRM	Corey A Morrison	1614 SW 28TH STREET	Add
		Cape Coral, FL 33914	Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove

D. If amending any other information,	enter change(s) here: (Attach additional sheets, if necessary.)
•	
•	
•	
August 20 Dated	2013
Cores A Mar	
	e of a member or authorized representative of a member
Corey A Morrison	
-	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00