L120000/5/47

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(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
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SEGRETARY OF STATE OF STORE OF CORPORATIONS OF CORPORATIONS

C. LEWIS

OCT 23 2012

EXAMINER

COVER LETTER

то	Registration S Division of Co				
SU	вјест:	RIPLEY HOM Name of Limit	15 LLC ted Liability Company		
The	enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.		
Ple	ase return all corresp	ondence concerning this matter	to the following:		
		MAI	Name of Person	<u> </u>	
			Firm/Company		
	1705 BARRETT LEAF LN Address				
	,	LONGK	100D, FL. 32750 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)					
For	further information	concerning this matter, please c	all:		
		RIPLEY of Person	at (401) 350 - 28 Area Code & Daytime Tel	99 ephone Number	
Enc	closed 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 enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	

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 SEGRETARY OF STATE DIVISION OF CORPORATIONS

2012 OCT 22 PM 1: 33

RIPLEY HOP	MES LLC
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v	were filed on $\frac{OZ/O1/ZO1Z}{}$ and assigned
Florida document number <u>L12000015147</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
MAC R&D	LLC
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	- A Ge
Enter new mailing address, if applicable:	CH
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered offi- registered agent and/or the new registered office address here:	
Name of New Registered Agent:	118
New Registered Office Address:	Enjet 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

<u>itle</u>	<u>Name</u>	<u>Address</u>	Type of Action
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. If amer	nding any other information, er	ter change(s) here: (Attach additional sheets,	if necessary.)
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			SEGRETARY DIVISION OF CO.
_	10/20/2012		
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	Signature of	of a member or authorized representative of a memb	
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	1 1	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00