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T. CLINE

APR 13 2012

EXAMINER

COVER LETTER

Registration Section

Division of Co	orporations		
SUBJECT:	; 5M Mar	nagement, LLC	
		ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	oondence concerning this matte	r to the following:	
		lisha E. Bacchus, Esq. Name of Person	
	Law Offi	ce of Nisha E. Bacchus, P.A.	
	1132 SE 3rd Avenue		
	<u>Fort</u>	Lauderdale, Florida 33316	
	NBacc F-mail address:	City/State and Zip Code hus@nishabacchuslaw.com to be used for future annual report notific	ation)
For further information	concerning this matter, please		,
	sha E. Bacchus of Person	at (<u>561</u>) Area Code & Daytime	602-251 Telephone Number
Enclosed 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)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regis Divis P.O.	LING ADDRESS: Stration Section ion of Corporations Box 6327 hassee, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions SSEE FLO

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(Name of the Limited	5M Management, LLC	our records)	
(Asine of the Limited	Liability Company as it now appears on Florida Limited Liability Company)	our records.	
The Articles of Organization for this Limited L	-	uary 21, 2012	2 and assigned
Florida document numberL12000024	<u>1778</u> .		
This amendment is submitted to amend the follow	owing:		
A. If amending name, enter the new name o	f the limited liability company here:		
The new name must be distinguishable and end wir "L.L.C."	th the words "Limited Liability Company,"	the designation "I	LC" or the abbreviation
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	TADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and/ registered agent and/or the new registered of	or registered office address on our r Mice address here:	ecords, enter	SEGname of the new
Name of New Registered Agent:	Law Office of Nisha E. Bacchus	s, P.A.	mo a m
New Registered Office Address:	1132 SE 3rd Avenue	lorida street ada	S S S
			, <u></u>
	<u>Fort Lauderdale</u> City	, Florida	33316 Zip Code
New Registered Agent's Signature, if changing l	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				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
			Add Remove	
			Add Remove	
			Add Remove	
			AddRemove	
			Add Remove	
			Add Remove	
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessa	ZHZ PR 12 AN IL 55 SECRETARY OF STATE PALLAHASSEE, FLORIDA	
Dated				
,		r or authorized representative of a member Vincent Miclet		

Page 2 of 2

Filing Fee: \$25.00