# 12000030432

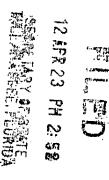
(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phon	e #)			
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nar	me)			
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
APR 2 4 2012					
L. SELLERS					

Office Use Only



800230637228

04/23/12--01042--029 \*\*25.00



# **COVER LETTER**

TO:	Registration Sect Division of Corpo		Z <b>art</b> , wet , , , , , , , , , , , , , , , , , , ,		 
SUBJI	ECT:	PRV Marketin Name of Limit	g Detection ted Liability Company		
The en	closed Articles of A	mendment and fee(s) are sub	omitted for filing.		
Please	return all correspond	lence concerning this matter	to the following:		
		1400 Col Naples,	Name of Person  Marketin 9  Firm/Company  Address  L. 341  City/State and Zip Code  9 A Concas  be used for future annual repo	ld. \$ 106 02 1.NET	
For fur	ther information con	cerning this matter, please co		t notification)	e.
,	(or CG) Namo of P	Lear		2/55/7/ Daytime Telephone Numbe	г
Enclose	ed is a check for the	following amount:			
\$25	i.00 Filing Fee [	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certified	ite of Status &

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

(Name of the Limited Liability Company as it now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on Worch 2, 2012 and assigned Florida document number <u>L</u> 120000 30 432 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida

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.

New Registered Agent's Signature, if changing 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> Fitle</u>	<u>Name</u>	<u>Address</u>	Type of Action
<del></del> -			Add Remove
			Add Remove
			Add Remove
	<del></del>		Add Remove
		· · · · · · · · · · · · · · · · · · ·	Add Remove
		<del></del>	Add Remove
. If amen	ding any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	·
	· · · · · · · · · · · · · · · · · · ·		_
eated	4/16/201/	<u></u>	<u> </u>
	Signature of a m	dember or authorized representative of a member	
	·	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00