#6710 P.001/003

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000248651 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: I2000000019

Phone : (305)552-5973 Fax Number : (305)220-1440

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Pmmil	Address:	
CURLL	ACCEPSS:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DELIGURT GROUP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

OCT 1 5 2012

T. HAMPTON

H 1 2 0 0 0 2 4 6 5 5 1 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE STATE SECRETARY OF CORPORATIONS

12 OCT 12 AM 7: 37 and assigned

	DELIGURT GROUP, LLC			₹ .0°.
	(Name of the Limited Liability Comp (A Florida Limited	any as it now appears Liability Company)	on our records.)	7: 3
The A Florid	rticles of Organization for this Limited Liability Compan document number <u>L1200051316</u>	y were filed on	1/16/2012	and assigned
This a	mendment is submitted to amend the following:			
A. If:	mending name, enter the new name of the limited lin	bility company here	. .	
The ne	w name must be distinguishable and end with the words "Lin	nited Liability Compa	y," the designation "I	.LC" or the abbreviation
Enter	new principal offices address, if applicable:			
(Princ	pal office address MUST BE A STREET ADDRESS		•	
	•			
Enter	new mailing address, if applicable:			
(Maill	ng address MAY BE A POST OFFICE BOX)		· · ·	
	•		<u> </u>	
	amending the registered agent and/or registered or red agent and/or the new registered office address he		nr records, <u>enter t</u>	he name of the new
	Name of New Registered Agent:			
	New Registered Office Address:	Fut	er Florida street ada	bass
		£m.	_	, ,
		City	, Florida	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accapt 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

Page 1 of 2

H12000248851

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:

<u>Citte</u>	Name	Address	Type of Actio
			Add Remove
			
_			Add Remove
			Add
			Remove
	<u>, </u>		Add Remove
	•	•	_∏Add
			Remove
. If amen	ding any other information, enter of	change(s) here: (Auach additional sheets, if necessary.) E.I.NUMBER 45-5057664	Remove
. Hamen			Remove
. Hamen			SECRE DIVISION (12 DCT
			SECRETARY DE SECRETARIA DE SECRET
	ADD THE FOLLOWING F.1		SECRETARY DIVISION OF CO
	OCTOBER 12 Signature of a m	2012 ember or authorized representative of a member	SECRETARY DE SECRETARIA DE SECRET

H12000245651