

L120000 68867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

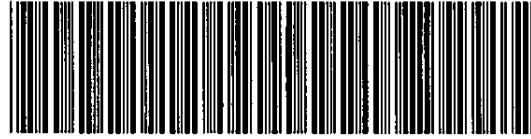
(Business Entity Name)

(Document Number)

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MICHIGAN SECRETARY OF STATE

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

Albinoni LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on May 22, 2012 and assigned Florida document number L12000068863.

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:

Albinoni LLC

*(Principal office address MUST BE A STREET ADDRESS)*

1025 Greenbriar Dr

Brandon, FL 33511

Enter new mailing address, if applicable:

Albinoni LLC

*(Mailing address MAY BE A POST OFFICE BOX)*

PO Box 6038

Brandon, FL 33508

**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:

Monique-Florence Drillon

New Registered Office Address:

1025 Greenbriar Dr

Enter Florida street address

Brandon

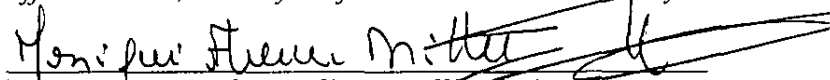
City

Florida 33511

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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Monique-Florence Drillon	1025 Greenbriar Dr, Brandon, FL 33511	<input checked="" type="checkbox"/> Add
		4434 W VArn Ave	<input checked="" type="checkbox"/> Remove
		Tampa, FL 33616	
MGR	Daniel Vallery-Masson		<input type="checkbox"/> Add
		4434 W Varn Ave	<input checked="" type="checkbox"/> Remove
		Tampa, FL 33616	
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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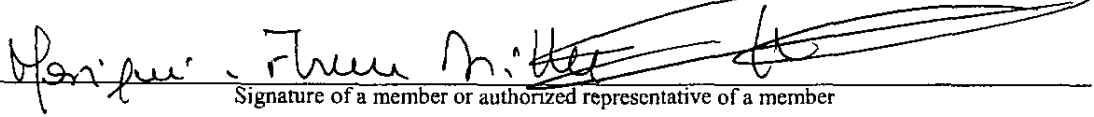
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated Friday, August 15, 2014

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

**Monique-Florence Drillon**

Typed or printed name of signee

RECEIVED  
AUG 16 10 45 AM '14  
FLORIDA DEPARTMENT OF STATE