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COVER LETTER

	Registration Sec Division of Corp						
SUBJEC"		JP POWER, LLC.					
SOBJEC	·	Name of Limited Liability Company					
The enclos	sed Articles of A	Amendment and fee(s) are sub	mitted for filing.				
Please reti	urn all correspon	ndence concerning this matter	to the following:				
		Jacqueline Feliciano					
			Name of Person				
		Cotney Construction Law					
			Firm/Company				
		3110 Cherry Palm Drive, Suite 290					
			Address				
		Tampa, FL 33619					
		City/State and Zip Code					
		E-mail address: (to be used for future annual report notification)					
For furthe	r information co	oncerning this matter, please ca	all:				
Jacquelin	e Feliciano		at () Area Code Daytime				
	Name of	Person	Area Code Daytime	Telephone Number			
Enclosed i	is a check for th	e following amount:					
□ \$ 25.00	0 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)			

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

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FOLLOW UP POWER, 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 05/25/2012 and assigned Florida document number ____L12000070675 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: FollowupCRM, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." N/A Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A 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: N/A Name of New Registered Agent: N/A New Registered Office Address: Enter Florida street address _ Florida N/A ______ Zip Code N/A

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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
N/A	N/A	N/A	
			Remove
			Change
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Typed or printed name of signee

Filing Fee: \$25.00