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T. HAMPTON

COVER LETTER.

TO: Registration Section Division of Corporations
SUBJECT: Phoenix Sloan LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michael S. Maluda
Phoenix Sloan LLC Firm/Company
3076 Curry Ford Rd.
Orlando, FL 32806 City/State and Zip Code roguepuborlando Chotmail. Com.
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael S. Maluda at (17), 756 - 0311 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$25.00 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

Phoenix Sloun	LLC
(Name of the Limited Liability Compa) (A Florida Limited L	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number \(\begin{align*} \begin{align*} \begin	were filed on June 19, 2012 and assigned
This amendment is submitted to amend the following:	고 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and end with the words "Limi" L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation
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 of	5208 F. Kalty St. Orlando, Fr. 32812 Tice 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 City Zip Code
	Lip Couc

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 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 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:

	Managing Member	Adduses	Type of Action
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Amending percentage of ownership
Stan Maluda 81%
Michael Maluda 18°6
Tram Gehovin 12
Dated January 15/1,2013.
Day Cehon
Signature of a member or authorized representative of a member
ram cenovin
Typed or printed name of signee

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Filing Fee: \$25.00

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