## L120000 88755

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



900237825859

07/30/12--01048--013 \*\*25.00

12 JUL 30 PH 1:50

SECRETARY OF STATE OF STATE OF CORPORATIONS

UUL 3 1 2012 T. HAMPTON

## **COVER LETTER**

	Registration So Division of Co				
SUBJEC	T:	Paradigm Con-	cepts Publishing, LLC	<b>,</b>	
SOBULC			ted Liability Company	<del></del>	
The enclo	osed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please ret	turn all correspo	ondence concerning this matter	to the following:		
		Enrique W. Lopez Name of Person			
			Name of Felson		
Paradigm Concepts Publishing, LLC				LC	
Firm/Company					
4915 Erin Lane					
Address					
		!	Melbourne, FI 32940		
	City/State and Zip Code				
		Р	ClHenry@gmail.com		
For further	er information o	econcerning this matter, please c	to be used for future annual report no call:	tification)	
	Enri	que W. Lopez	at (_305 )_	525-9808	
		of Person		ime Telephone Number	
Enclosed	l is a check for t	he following amount:			
\$25.0	0 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sed)    Sed	
	Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations lox 6327 assee, FL 32314	STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	oorations Center Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



12 JUL 30 PM 1:50

Paradigm	Concepts Publishing,	, LLC	
( <u>Name of the Limited Lia</u> (A Flo	ability Company as it now appea orida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liabi	lity Company were filed on	07/09/2012	and assigned
Florida document numberL1200008875			
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of th	e limited liability company he	<u>re</u> :	
The new name must be distinguishable and end with th "L.L.C."	ne words "Limited Liability Comp	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	ADDRESS)		
	****		
Enter new mailing address, if applicable:			·-
(Mailing address MAY BE A POST OFFICE BO	<u></u>	· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter t	he name of the new
Name of New Registered Agent:			
<del> </del>			
New Registered Office Address:	E	nter Florida street add	ress
		, Florida	
	City		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 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

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member Type of Action Title <u>Name</u> **Address** MGR WIENER, ERIC S ☐ Add 4961 SW 54 ST., #3 ✓ Remove FT. LAUDERDALE FL 33314 US. BECK, JAMES MGRM 9080 SUNSERT STRIP ☐ Add SUNRISE FL 33322 US √ Remove ☐ Add Remove Remove ∏Add Remove  $\prod$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July 25 2012 Dated \_\_ Signature of a member or authorized representative of a member Enrique W. Lopez Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00