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(Ad	dress)	· .
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SECRETARY OF STATE

J. SAULSBERRY EXAMINER

NOV 27 2012

## **COVER LETTER**

Division of Cor			,		
SUBJECT: AC	iJ Internation	<u> </u>			
	Name of Limit	ed Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please return all correspondent	ondence concerning this matter	to the following:			
	(	Jenesis Martine-	2		
	AGJ	Name of Person  International LLC  Firm/Company	,		
	_				
	887 S.	Kirkman Rd. Ste	203		
		Address		•	
	_Orlando,	FL 32811 City/State and Zip Code		<b>31/2 NOV 26</b> SECRETAR) TALLAHASSI	_
	Genesic M	One used for future annual report notification	an)		
For further information of	oncerning this matter, please ca		он)	AN 9: 23 OF STATE E. FLORID	
Chemesis A	Mathez f Person	at ( <u>646</u> ) <u>402 - 2316</u> Area Code & Daytime Te	Janhana Number	23	
Name C	it Person	Area Code & Daytine Te	терноне матоет		
Enclosed is a check for t	he following amount:				
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &	ed)

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

AGJ Internationa	121C	
(Name of the Limited Liability Compar (A Florida Limited L	iy as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L1200089605</u>	-1.1	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	•
The new name must be distinguishable and end with the words "Limit L.L.C."	ed Liability Company," the designation "LLC"	or the abbreviation
Enter new principal offices address, if applicable:	TAL	3
(Principal office address MUST BE A STREET ADDRESS)	CRE	§ 71
	ASS.	726
Enter new mailing address, if applicable:	EE.FLE	
Mailing address MAY BE A POST OFFICE BOX)	PATE	2
	P	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	ice address on our records, <u>enter the r</u> :	name of the new
Name of New Registered Agent:		<del> </del>
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	Citv Z	in 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 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

<u>Title</u>	Name		Address	Type of Action
MGRM	AJG Managem	entlop	882 S. Kirkman Rd. Ste 20	Add
			882 S. Kirkman Rd. Ste 203	Remove
<del></del>		<del></del>		Add
				Remove
			77	
			SECRETARY OF STATE TALL AHASSEE, FLORIDA	Add
			SSEE	Remove
			ROPE	M 9 28
				Remove
				_ □
				Remove
				— Add
				Remove

11/20 , 2012		
Denes B. Martis	3	
Signature of a member or authorize	•	
	Signature of a member of authoriza	9) · 0 //5

Page 3 of 3

Filing Fee: \$25.00

AMENOV 26 AM 9:2