Florida Department of State

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ETHOSU, LLC

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Corporate Filing Menu

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FAX COVER SHEET

то		
COMPANY		
FAX NUMBER	18506176383	
FROM	Tony Burroughs	
DATE	2012-09-19 09:09:49 PDT	
RE	FL SOS - LZ order # 504575094	

COVER MESSAGE

Tony Burroughs

Business Special Filings - Legal Document Preparation Specialist

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TO:

Registration Section

COVER LETTER

Division of Co	orporations		
SUBJECT: ETHOS	: BU, LLC		
		nited Liability Company)	
•			
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
	ondence concerning this matte		
	Barbara Dang		
		(Name of Person)	
	Legalzoom.com, Inc	•	
•		(Firm/Company)	
	100 W. Broadway S	uite: 100	
		(Address)	
	Glendale, CA 91210)	,
		(City/State and Zip Code)	
For further information	concerning this matter, please	call:	
Barbara Dang		at (323) 962-8600 (Area Code & Daytime	
(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	\$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

FILED
12 SEP 19 AM II: 22
SECRETARY OF STATE

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ETHOSU, 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 08/14/2012 and assigned
Fiorida document number <u>L12000104256</u> .
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.IC."
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:
New Registered Office Address:
(Enter Florida street address)
, 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

Title	<u>Name</u>	Address	Type of Action
<u>MGRM</u>	Paul A. Evans	171 Arbor Blvd. Naples, FL 34119 US	Add Remove
MGRM	My T Thai	171 Arbor Blvd. Naples, FL 34119 US	Add Remove
<u>MGRM</u>	Yilin Shen	171 Arbor Blvd. Naples, FL 34119 US	Add Remove
<u>MGRM</u>	Thang Dinh	171 Arbor Blvd Naples, FL 34119 US	Add Remove
MGRM	Paul Andrew Evans	171 Arbor Blvd. Naples, FL 34119 US	√Add Remove
MGRM	My Tra Thai	7077 SW 34th Place Gainesville, FL 32608 US	
D. If smend	ling any other information, enter c	hange(s) here: (Attach additional sheets, if necessary.)	
			-
Dated	,	2612. Doll Jan	
	- ئن	Paul A. Evans yped or printed name of signee	
		Page 2 of 2	

Filing Fee: \$25.00