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T "AMPTON

COVER LETTER

TO: `Registration Section Division of Corporations
SUBJECT: Bob Morgan 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:
Name of Person
Jean Market Grosp LLC Firm/Company
69 E Pine St. Address
Orlando Fl 32801 CityState and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
John Dobson at (407) 496-7234 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
25.00 Filing Fee & Certificate of Status Status

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

Bob Morgan	LLC	In \
(A Florida Limited (A Florida Limited)	npany as it now appears on our recorded Liability Company)	<u>15.</u>)
The Articles of Organization for this Limited Liability Compa	any were filed on <u>9/28/20</u>	12 and assigned
Florida document number <u>L1200012438</u>	1	
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited l	liability company here:	SECRETARY VISION OF CO
		न् हिन्दे
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Company." the designation	ution "LLC" or the lighter visitor
Enter new principal offices address, if applicable:		<i></i>
(Principal office address MUST BE A STREET ADDRESS	5)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Jean Marke 69 E. Pinc Orlando, F	+ 6 rovp 5+. = 1 32801
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	eet address
	, Flor	ida
	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 Type of Action <u>Title</u> Name Address Bobort Morgan 1315 Oustin Ave Add MGRM orlando, Fl 32839 Remove Team Market Group LLC 69 E. Pine St. XAdd MGRM <u>Orlando, Fl 32801</u> Remove MBR 1315 Dustin Ave Add Robert Morgan MBR orlando, F1 32839 Remove

If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
, •	
ad	7/28/2013 .2013.
	720/00 =
	Signature of a member or authorized representative of a member
	John Dobson
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: S25.00

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SECRETARY OF STATE ON OF CORPORATION