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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: PEU	HS Mrdu Name of Limit	a LUC ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Pentrus 10 Faire Deerfield	Name of Person Moda Firm/Company Way DRIVE Address Beach, Flor City/State and Zip Code De used for future annual report notification	
	•	•	ion)
For further information c	oncerning this matter, please co	all:	
Name o	f Person	at ()Area Code & Daytime Te	elephone Number
Enclosed is a check for the	he 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pentius Med	ua, LLC	
	ty Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number	Company were filed on 10/11/12	and assigned
This amendment is submitted to amend the following:	•	Circle Control of the
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," the designation	"LEC" or the abbreviation
Enter new principal offices address, if applicable:	AND TO THE WARRIES TO IT I WARRING THE WARRING THE WARRING THE WARRING THE WARRING THE WARRING AT THE WARRING	
(Principal office address MUST BE A STREET ADD	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office ad		the name of the new
Name of New Registered Agent:	·	
New Registered Office Address:	Enter Florida street a	ddress
	. 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** MER Promutus Inc 10 Cheswold Blvd Add Remove Newark, DE 19713 Add Remove MGR Pentius Financial, Inc. 2881 E. Oakland Park Blud Ste 445
Remove
Ft. Lauderdale, FL 33306 Add Remove Add Remove

). If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ited _	July 18 2013.
	Mulle-
	Signature of a member or authorized representative of a member
	George MilleR Typed or printed name of signee
	Typed or printed name of signee
	Dama 2 a 6 2

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Filing Fee: \$25.00