L12000141917

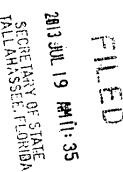
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JUL 22 2013 T CLINE

COVER LETTER

TO: Registration Se Division of Cor				
\wedge	mutus Lu	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:		
	Grorge	Miller Name of Person US LUC		
	Promuti	is LLC		
		Firm/Company		
	2234 N	1. Federal Hu	4 4 395	
	Boca Ra	tm PL 33 City/State and Zip Code	<u>431</u> Es 2	
	9-cirge @	OVO WUTUS. COM o be used for future annual report notification	SECRE I	
For further information of	concerning this matter, please co		IARY OF S ASSEE, FL	H 1 days
Name o	of Person	at (Ξ
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)	☐\$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

Promutus, LLC		
	pany as it now appears on our record I Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Compar Florida document number <u>L12 000141917</u> .	. 1 2 1 . n	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liz	ability company here:	
The new name must be distinguishable and end with the words "Lin"L.L.C."	mited Liability Company." the designat	tion "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		L 19 H
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		9 3 A
B. If amending the registered agent and/or registered registered agent and/or the new registered office address here.		nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stre	et address
	. Flori	da
	Ciry:	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>Address</u> <u>Name</u> MBR Promutus Inc 10 Cheswold BWd - ID Add Newark DE 19713 Remove Add Remove MGR Pentius Financial, Inc. 2881 E. Oakland Park Blud Remove Fort Lauderdale FL 33306 Add Remove Add Remove

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d	ely 18 2013
<i>-</i>	Stille J
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 JUL 19 MM II: 35
SECRETARY OF STATE
SECRETARY OF STATE