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C. LEWIS

DEC - 3 2012

EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

The World in 5k, 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:

Michael Lustigman

Name of Person

Bushido Warrior, LLC

Firm/Company

4027 194th Trail

Address

Sunny Isles Beach, FL 33160

City/State and Zip Code

Lusti23@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Lustigman

.305.299-0903

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED SECRETARY OF STATE UNVISION OF CORPORATIONS

2012 NOV 30 PM 1: 35

Around The World in 5K, LL		
(<u>Name of the Limited Liab</u> (A Flor	pility Company as it now appears or ida Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liabili Florida document number <u>L12000145082</u>		
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
Bushido Warrior, LLC		
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company,	" the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	<u></u>	
(Principal office address MUST BE A STREET A)	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the name of the new
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: 2812 NOV 30 PM 1: 35 MGR = Manager MGRM = Managing Member Type of Action <u>Address</u> <u>Title</u> <u>Name</u> Add Remove Remove Add Remove Remove

. If amending any other information,	enter change(s) here: (Attach additional sheets, if neces	DIVISION OF	FILED ARY OF STATE CORPERATION
		2012 NOV 3	0 PM 1: 3
November 23	2012		,
Signature	of a member or authorized representative of a member		
	Typed or printed name of signee Page 3 of 3		
	Filing Fee: \$25.00		