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| | (Requestor's Name) | |
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| | (City/State/Zip/Phone #) | |
| PICK-UF | P □ WAIT | MAIL |
| | | |
| | (Business Entity Name) | |
| | (Document Number) | |
| Certified Copies | Certificates of | ^f Status |
| Special Instructions | to Filing Officer: | |
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Office Use Only



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| TO: Registration Division of | n Section Corporations | | | | |
|------------------------------|--|---|--------------------|--|--------|
| Maryed | labi L1.C | | | | |
| 30B3EC1. | Name of Lin | nited Liability Company | | | |
| The enclosed Articles | s of Amendment and fee(s) are sub | omitted for filing. | | | |
| Please return all corre | spondence concerning this matter | to the following: | | | |
| | Lorie R. Ingraham | | | | |
| | · · · · · · · · · · · · · · · · · · · | Name of Person | | | |
| | Maryedabi LLC | | | | |
| | | Firm/Company | | 75 5 | |
| | 14765 Baltusrol Drive | | | | T |
| | <u> </u> | Address | | -2 | |
| | Orlando, FL 32828 | | | JUN -2 M D 16 NE LATE OF STATE ANNESSEE, FLORIDA | i C |
| | | City/State and Zip Code | | | |
| | lorie.ingraham@engeniume | one.com to be used for future annual report notif | ication) | 製用の | |
| For further information | on concerning this matter, please co | | ······· | | |
| Lorie R. Ingraham | • . | 321 948-6826 | | | |
| Nan | ne of Person | Area Code Daytime | : Telephone Number | | |
| Enclosed is a check fo | or the following amount: | | | | |
| □ \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | ■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified (| of 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

| Maryedabi LLC | | |
|--|---|--------------------------|
| (Name of the Limited Liability C (A Florida Lin | company as it now appears on our records.) nited Liability Company) | |
| The Articles of Organization for this Limited Liability Completion of Complete Compl | pany were filed on June 24, 2013 | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited | liability company here: | |
| Engenium One LLC | | |
| The new name must be distinguishable and contain the words "Limited | Liability Company," the designation "LLC" or t | he abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 14765 Baltusrol Drive | |
| (Principal office address MUST BE A STREET ADDRES. | S) Orlando, FL 32828 | |
| | | 50 6 |
| Enter new mailing address, if applicable: | 1969 S. Alafaya Trail, #130 | |
| (Mailing address MAY BE A POST OFFICE BOX) | Orlando, FL 32828 | 58.7 |
| B. If amending the registered agent and/or registere registered agent and/or the new registered office address | | ter the name of the new |
| Name of New Registered Agent: N/A | | |
| 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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered affice 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

4 m

| MGR = M $AMBR = A$ | anager uthorized Member | | |
|--------------------|----------------------------|---------|--|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
| | N/A | | Add |
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| o effective | date is listed, the date must h | oe specific and cannot | be prior to date of | filing or more than | 90 days after filin | g.) Pursuant to 605 | .0207 |
| 4 16.1. | date inserted in this bloc effective date on the Dep | artment of State's i | ecords. | tory tiling requi | rements, this dat | e will not be list | ed as |
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| record The 90th | May 28 | rd is filed. 2010 | or suthorized repr | | mher | | |
| record The 90th | May 28 | rd is filed. 2010 | n grake | | mher | | |

Filing Fee: \$25.00