L13000105399

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SECRETARY OF STATE TALL AHASSEE, FLORIDA

N. CUMBER AUG 16 2011

* COVER LETTER

Registration Section **Division of Corporations**

FPSC, 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:

Albert J. Tiseo, Jr.

Name of Person

Goldman, Tiseo & Sturges, PA

701 JC Center Court, Ste 3

Port Charlotte, FL 33954

City/State and Zip Code

atiseo@gtslawfirm.com

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

For further information concerning this matter, please call:

Albert J. Tiseo, Jr.

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
2013 AUG 15 PM 12: 43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FPSC, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

•	, , ,,	
The Articles of Organization for this Limited Li Florida document number L13000105399	ability Company were filed on July 25, 20	and assigned
This amendment is submitted to amend the follo	-	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Company," the des	ignation "LLC" or the abbreviation
Enter new principal offices address, if applica	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		
B. If amending the registered agent and/or the new registered of		s, enter the name of the new
Name of New Registered Agent:	•	
New Registered Office Address:	Enter Florida	street address
		lorida
	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

<u>Title</u> MGRM	Name Prior I Korbycop		Type of Action
	Brian J. Kerbyson	4561 Grassy Point Blvd	Add
		Port Charlotte, FL 33952	Remove
			Add
			Remove
			Remove
			-
~~~~			Add
			Remove
			-
	- Internation of the second of		Add
			Remove
			_
			Add
			Remove

•	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ated	August 13/12013
	Signature of a member or authorized representative of a member Albert J. Tiseo, Jr.
	Typed or printed name of signee
	Page 3 of 3
	Filing Fee: \$25.00

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2813 AUG 15 PN 12: 44
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TALLAHASSEE, FLORIDA