L13000145422

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SECRETARY OF STATE
TALLAHASSEF ELORIDA

T. Burch OCT 28 2013

TO:

Registration Section
Division of Corporations

SUBJECT:

Metgus Trove Digital 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:

Richard Witcher

Name of Person

Metgus Trove Digital LLC

Firm/Company

3505 Lake Lynda Dr Suite 237

Address

Orlando, FL 32817

City/State and Zip Code

richard@blue.cr

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

For further information concerning this matter, please call:

Richard Witcher

₄₀₇ 733-0770

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

TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limite</u> (ed Liability Compan A Florida Limited Li	y as it now appears ability Company)	s on our records.)	
The Articles of Organization for this Limited In Florida document number L1300014542	Liability Company v	were filed on 10/	15/2013	_ and assigned
This amendment is submitted to amend the fol	llowing:			
A. If amending name, enter the new name	of the limited liabi	lity company here	:	
N/A				
The new name must be distinguishable and end w "L.L.C."	vith the words "Limite	ed Liability Compar	ny," the designation "LLo	C" or the abbreviation
Enter new principal offices address, if appli	icable:	N/A		
(Principal office address MUST BE A STRE	ET ADDRESS)			
	,		SEC.	ယ်
Enter new mailing address, if applicable:		N/A	AHASSE AHASSE	F1L
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and registered agent and/or the new registered of			ur records, enter the	E name of the new
Name of New Registered Agent:	Malka Leo	n		
New Registered Office Address:	4046 N Go	Idenrod Rd		
		Enter Florida street address		ss
	Winter Par	k	, Florida <u>32</u> 7	92
		City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Metgus Trove Digital LLC

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 it. Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

OI PIGHGEINE PICHOLI DENE GUGEU OI TEMOTEU HOM DEI LECOLUS.

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Richard Witcher	3505 Lake Lynda Dr	Add
		Suite 237	Remove
		Orlando, FL 32817	
MGR	Malka Leon	4046 N Goldenrod Rd	Add
•		Suite 253	Remove
		Winter Park FL 32792	
			Add
			Remove
		LAHA AHAS	0CT F
	·	SEE CO	Z ⁴ Add
		ORIDA	Remove
			Add
			Remove
			Add
			Remove

N/A	штет епапредој пете. (лимен мамиона опеси, у песеовагу.)
	
October 22	2013
Al O	
Signature	of a member or authorized representative of a member
Richard Witcher	
•	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

13 OCT 24 AN IO: 49
SECHETARY OF STATE
TALLAHASSEE, FLORIDA