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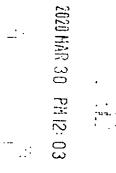
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COVER LETTER

TO:	Registration Se Division of Cor				
cub ica		Group, LLC	•		
SUBJEC	ul:	Name of Lim	Name of Person Firm/Company ite 800 Address City/State and Zip Code com s: (to be used for future annual report notification) e call: 727 233-3558		
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspo	endence concerning this matter	to the following:		
		Rebecca Graham			
			Name of Person		
		The Murkin Group, LLC			
			Firm/Company		
		360 Central Avenue, Suite	800		
			Address		
		St. Petersburg, FL 33701			
			,		
		bgraham@murkingroup.coi		port notification)	
For furth	her information c	oncerning this matter, please c		•	
Rebecca	a Graham				
	Name o	f Person	Area Code	Daytime Telephone Number	
Enclosed	d is a check for th	he following amount:			
■ \$ 25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	sed) Certified C	of Status &
	Mailing Addres Registration		<u>Street Add</u> Registrat	<u>Iress:</u> ion Section	
	Division of C		•	of Corporations	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Murkin Group, LLC		
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our records.) lited Liability Company)	
The Articles of Organization for this Limited Liability Comp. Florida document number $\frac{L13000149120}{L13000149120}$.	pany were filed on 10/23/2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:	 	
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		029
		020 h AR
Enter new mailing address, if applicable:		~ 3 <u>~ 3</u>
Mailing address MAY BE A POST OFFICE BOX)		-0 :-
		312
		. 03
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our records, <u>enter the r</u>	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
<u></u>	, Florida	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 office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
CEO	JoAnne Fort	360 Central Ave	□Add
		Suite 800	≅ Remove
		St. Petersburg, FL 33701	□Change
CEO	Michael Manies	360 Central Ave	= Add
		360 Central Ave Suite 800	□Remove
		St. Petersburg, Fz 33.	7.01 BChange AR 33 BAdd
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ctive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing or more the date inserted in this block does not meet the applicable statutory filing recomment's effective date on the Department of State's records.	han 90 days	option s after fil s, this d	ing.) Pursu	ant to 605.t ot be liste	0207 d as
ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the filed.	he earlier (of: (b)	The 90th	day after	the
Signature of a member or authorized representative of a					
45 Graham					
Signature of a member or authorized representative of a	member				

. . .

Filing Fee: \$25.00