

L17000158260

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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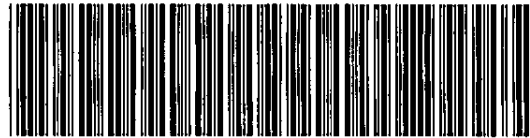
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Metrix Global Associates, 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:

Julie Morgan

Name of Person

Metrix Global Associates, LLC

Firm/Company

15 Paradise Plaza #250

Address

Sarasota, FL 34239

City/State and Zip Code

bluline.services@gmail.com

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

For further information concerning this matter, please call:

Julie Morgan

Name of Person

801 712-5197

at ()

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Metrix Global Associates, 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 Liability Company were filed on 11/12/13 and assigned
Florida document number L13000158260.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Julie Morgan

New Registered Office Address:

15 Paradise Plaza #250

Enter Florida street address

Sarasota

City

Florida

34239

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 Changing Registered Agent, Signature of New Registered Agent

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TALLAHASSEE, FLORIDA

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Julie Morgan	15 Paradise Plaza #250 Sarasota, FL 34239	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Eric Herman	15 Paradise Plaza #250 Sarasota, FL 34239	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Michael Williams	40215 Paseo Sereno Temecula, CA 92591	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Nathaniel Bunnell	40215 Paseo Sereno Temecula, CA 92591	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Ryan Burgon	40215 Paseo Sereno Temecula, CA 92591	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	John Burgon	40215 Paseo Sereno Temecula, CA 92591	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated

9/9/14



Signature of a member or authorized representative of a member

Julie Morgan

Typed or printed name of signee

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Filing Fee: \$25.00

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