Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

: (850)617-6383 Fax Number

From:

Account Name : LEGALZOOM.COM INC.
Account Number : I20010000062
Phone : (323)962-8600
Fax Number : (323) 962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CRATUS ASSOCIATES LLC

Certificate of Status	0
Certified Copy	1
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Electronic Filing Menu

Corporate Filing Menu

JAN 2 4 2013

T. HAMPTOI

TO: Registration Section

COVER LETTER

Div	ision of Cor	porations		
SUBJECT:	CRATUS	ASSOCIATES LLC		
SUBJECT:		Name of Lim	ited Liability Company	············
The enclosed	Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm/Company	
		100 W. Broadway Sui	te 100	
			Address	
		Glendale, CA 91210		
			City/State and Zip Code	
		jdlawhorn@comcast.ne		
		E-mail address; (to be used for future annual report notifi-	cation)
For further is	nformation c	oncerning this matter, please ca	all:	
lmelda Va	squez		323 962-8600 e	
	Name of	Person	Arca Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
□ \$25.00 F	iling 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

IN JAN 23 AM B: SECRE FARY OF STAN AHASSEE FLO

CRATUS ASSOCIATES LLC

(Name of the Limited Liability Company as it now superirs on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/03/2014 Florida document number <u>L1400</u>0000987 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 "LLC." 8413 Via Bella Notte Enter new principal offices address, if applicable: Orlando, FL 32836 (Principal office address MUST BE A STREET ADDRESS) 8413 Via Bella Notte Enter new mailing address, if applicable: Orlando, FL 32836 (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:

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

New Registered Office Address:

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

Enter Florida street address

, Florida _

Page 1 of 3

TO:

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>	Address	Type of Action
AMBR	John D. Lawhorn	8413 VIA BELLA NOTE	Add
		ORLANDO, FL 32836	■ Remove
MGRM	John D. Lawhorn	8413 Via Bella Notte	Add
		Orlando, FL 32836	☐ Remove
		<u> </u>	
			П Rелюче
			□ Remove
			TALLY T
			ANOSE PARTY
			AH 8: 48 F STELLE
	,		Remove
	Рад	e 2 of 3	

If amendin	g any other information, euter change(s) here: (Attach additional sheets, if necessary.)
,	
 .,	
-	
(The effective d	te, if other than the date of filing:
Dated	•
0	John David Lawhorn Signature of a member or authorized representative of a member
Je	ohn David Lawhorn
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED

2014 JAN 23 AM 8: 48

SECRETARY OF STATE
SEC