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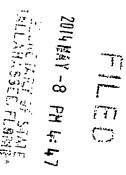
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COVER LETTER

TO:

Registration Section Division of Corporations

360 PERSPECTIVE PARTNERS, LLC

SUBJECT

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:

BRETT VOGELER

Name of Person

Firm/Company

3616 HARDEN BLVD #358

Address

LAKELAND, FL 33803-5938

City/State and Zip Code

BRETTVOGELER@GMAIL.COM

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

For further information concerning this matter, please call:

BRETT VOGELER

_863\255**-**1613

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

360 PERSPECTIVE PARTNERS, 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 4/23/2014 and assigned Florida document number <u>L1</u>4000066169 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." 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: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida

Zip Code

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
MGR	BRETT A VOGELER	3616 HARDEN BLVD	≣ Add
		#358	☐ Remove
		LAKELAND, FL 33803-5938	
			Add
			Remove
]3- 	
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If amending any other information, enter change(s) here: (Attac.	• • • •
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he date this document is filed by the Florida Department of State) Dated MAY 6 , 2014 Signature of a member or authorized pro-	resentative of member
he date this document is filed by the Florida Department of State) Oated MAY 6 Signature of a member or authorized pro BRETT A VOGELER	resentative of member Figure 20 Figure 20
Signature of a member or authorized for BRETT A VOGELER	resentative of member

Page 3 of 3

Filing Fee: \$25.00