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MAY 10 2016 S. YOUT&G

COVER LETTER

TO:	Registration Se Division of Cor			
CUDIC	PDC MAN	AGEMENT GROUP, LLC		
SUBJE	.c::	Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		ADRIANNE L LATHRO	P	
			Name of Person	
		PDC MANAGEMENT G	ROUP	
			Firm/Company	
		12675 SAMPSON ROAD		16 HAY -9
		-	Address	P
		JACKSONVILLE, FL 322	218	PH 4:
			City/State and Zip Code	
		adrianne.lathrop@pdcmg.c		
For fun	ther information co	e-man address: (to be used for future annual report no all:	ancation)
	ANNE LATHROF		904 768-7116	
	Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclose	ed is a check for th	ne following amount:		
\$25	5.00 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)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COUR Registration Sect Division of Corp Clifton Building 2661 Executive C Tallahassee, FL 3	orations Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PDC MANAGEMENT GROUP, LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	nany as it now appears on our records.) I Liability Company)	
The Articles of Organization for this Limited Liability Compan	y were filed on January 14, 2015	and assigned
Florida document number L15000008276		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liah	oility Company," the designation "LLC" or the	abbreviation L.C.
Enter new principal offices address, if applicable:		3 23
(Principal office address MUST BE A STREET ADDRESS)		
		ing.
Enter new mailing address, if applicable:	12675 SAMPSON ROAD	#: 5 TE
(Mailing address MAY BE A POST OFFICE BOX)	JACKSONVILLE, FL 32218	ن ال
B. If amending the registered agent and/or registered	office address on our records, ente	er the name of the nev
registered agent and/or the new registered office address he		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida _	Zip Code
	City	гір Сойе

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

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
MGR	KENNETH E LATHROP	12675 SAMPSON ROAD	□ Add
		JACKSONVILLE, FL 32218	■ Remove
			Change
			Add
			Remove
			Change PH 55
			Remove
			□ Change
·			
			□ Remove
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<u>.</u>			Add
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ffective date, if other than the data effective date is listed, the date must lote: If the date inserted in this blococument's effective date on the Department.	e specific and cannot be prior to date of filing or mo k does not meet the applicable statutory filing	(optional) ore than 90 days after filing.) Pursuant to 605.020 requirements, this date will not be listed as
e record specifies a delayed The 90th day after the reco	effective date, but not an effective ti d is filed.	me, at 12:01 a.m. on the earlier o
ated APRIL 15	, 2016	
<u> </u>	gnature of a member or authorized representative of	Of a member
J	B	

Page 3 of 3

Filing Fee: \$25.00