## LIUMACOUSI

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400280742154

01/28/16--01022--013 \*\*25.00

FILED
2016 JAN 28 P 1: 20

JAN 29 2016 D.BRUCE

## **COVER LETTER**

TO: Registration S Division of Co	
Ascend H	oldings Management Company LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Articles o	f Amendment and fee(s) are submitted for filing.
Please return all corresp	condence concerning this matter to the following:
	Paula Barnett
	Name of Person
	Pino Nicholson, PLLC
	Firm/Company
	189 S. Orange Ave., Suite 1650
	Address
	Orlando, FL 32801
	City/State and Zip Code pbarnett@pinonicholsonlaw.com
	pbarnett@pinonicholsonlaw.com  E-mail address: (to be used for future annual report notification)  concerning this matter, please call:
For further information	7.77 (1.3.1
Paula Barnett	at () 956-4245
Name	of Person Area Code Daytime Telephone Number
Enclosed is a check for	the following amount:
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status 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

Ascend Holdings Management Company 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 January 7, 2016 and assigned Florida document number L16000006031 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Ascend Ventures Management Company LLC The new name must be distinguishable and contain 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 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

If Changing Registered Agent, Signature of New Registered Agent

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 Title <u>Name</u> **Address Type of Action** □ Add ☐ Remove □ Change □ Add \_□ Remove \_□ Change \_□ Add □ Remove ☐ Change □ Add Remove Change NOSEE FLORIDA Remove \_□ Change □ Add □ Remove

☐ Change

<del></del>		·	<del></del>	<del></del>
<del></del>				
770100				
				<del></del>
- Manufacture -				
				<del></del>
- William III				
Tective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be te: If the date inserted in this block does not meet the	applicable statutory fi	(option more than 90 days after the fing requirements, this	<b>nal)</b> illing.) Pursuan date will not	nt to 605.02 be listed
cument's effective date on the Department of State's re				
record specifies a delayed effective date, but The 90th day after the record is filed.	ut not an offoctive	a time at 12:01 a	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	a Baarlios
The 90th day after the record is filed.	ut not an enective	e time, at 12.01 a		rearrieg, ≩
ted,	·			1
$f)$ $\gamma$	7/11		TSIA T	· .
man	or authorized representat	>	REC.	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00