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D. SCOTT Jan 2/3/7913

COVER LETTER

TO: Registration Section Division of Corporations	<i>\$</i>
SUBJECT: CB PUB/	1510G Company L-L.C.
The enclosed Articles of Amendment and fee(s) are su	bmitted for filing.
Please return all correspondence concerning this matte	r to the following:
Clinton LB Publ 	Name of Person 15hing Company L. L. C. Firm/Company Address Address
<u>JACKSons</u> pastorbush	City/State and Zip Code 10 Cf m All COM = = = -7
E-mail address: For further information concerning this matter, please	an 151-96 88 8 0 5
Name of Person	at (704) 471 1000 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee \$\&\ \text{Certificate of Status}	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) 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

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

The Articles of Organization for this Limited Liability Company were filed on Florida document number L 180000 67 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 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 pame of 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.

If Changing Registered Agent, Signature of New Registered Agent

or removed	g Authorized Person(s) from our records:		_			
MGR = M $AMBR = A$	Name TAS MINC			3/65	frami	ngo Ave.
<u>Title</u>	<u>Name</u>		<u>Address</u>	Philade	phia	Type of Action
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Typed or printed name of signee

Filing Fee: \$25.00