L94000000640

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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SECRETARY OF STATE

ALL AHASSEF FI COME

J. BRYAN

APR 25 2011

EXAMINER

COVER LETTER

| | Registration S Division of Co | | | |
|---|----------------------------------|--|---|--|
| SUBJEC | CT: | Dayli | ghtphoto, LC | |
| | | Name of Limi | ited Liability Company | |
| The encl | osed Articles o | f Amendment and fee(s) are sub | omitted for filing. | |
| Please return all correspondence concerning this matter | | | to the following: | HAPR 22 PM 1: 48 SECRETARY OF STATE FALLANASSEE. FLOR |
| | | | Tanya Arteaga | |
| | | | Name of Person | SEE |
| | | | Baur & Klein, PA | FFLOR |
| | | | Firm/Company | |
| | | 100 Nort | h Biscayne Blvd., Suite 210 | ₩ |
| | | | Address | |
| | | 1 | Miami, Florida 33132 | |
| | | | City/State and Zip Code | |
| | | trarte | aga@worldwidelaw.com to be used for future annual report notific | ation) |
| For furth | er information | concerning this matter, please c | • | |
| | Ta | anya Arteaga | at (305) 3 | 77-3561 |
| Name of Person | | of Person | Area Code & Daytime | Telephone Number |
| Enclosed | is a check for | the following amount: | | |
| ₹ \$25.0 | 0 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 | | | STREET/COURIE Registration Section | |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| | Daylightphoto, LC | <u></u> . | · |
|---|--|-----------------------------|--|
| (<u>Name of the Limited L</u> (A F | iability Company as it now appear lorida Limited Liability Company) | rs on our records.) | |
| | , | | |
| The Articles of Organization for this Limited Liab | oility Company were filed on | 11/22/1994 | and assigned |
| Florida document number L94000006 | 40 . | ÷ | 20 2 - |
| | | | 超电 |
| This amendment is submitted to amend the follow | uina: | | 野るし |
| rins amendment is subtilitied to amend the follow | mg. | | TILEU RECHESSER RECHES RECHESSER RECHESSER RECHESSER RECHESSER RECHESSER RECHESSER RECHESSER RECHESSER RECHESSER RECHESSER RECHESSER RECHESSER RECHES RECHESSER RECHESSER RECHES RECHES RECHES RECHES RECHES RECHES RECHES RECHES RECHES RECHES RECHES RECHES RECHES RECHES RECHES R |
| A. If amending name, enter the new name of the | <u>he limited liability company her</u> | <u>·e</u> : | Rog 3 |
| | | | 707 |
| The new name must be distinguishable and end with t | the words "Limited Liability Compa | any," the designation "l | LC" or the abbreviation |
| "L.L.C." | | | B |
| Enter new principal offices address, if applicab | le: | | |
| (Principal office address MUST BE A STREET. | | | |
| | <u> </u> | | |
| | | | |
| | | | |
| Enter new mailing address, if applicable: | · · · · · · · · · · · · · · · · · · · | | |
| Mailing address MAY BE A POST OFFICE BO | <u> </u> | | |
| | | | |
| | | _ | |
| B. If amending the registered agent and/or registered agent and/or the new registered offic | | our records, <u>enter t</u> | he name of the new |
| registered agent and/of the new registered offic | c address nere. | | |
| | | | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | En | ter Florida street ada | ress |
| | | , Florida | |
| | City | , | 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

| <u>Title</u> | Name | Address | Type of Action |
|--------------|--------------------------------------|--|---|
| SEC | THOMAS BAUR | 100 NORTH BISCAYNE BLVD. SUITE 2100 MIAMI, FLORIDA 33132 | Add Remove |
| | | | THE RESERVE TO SERVE |
| - | | | Change 3 |
| | | | Addr Reznove |
| · | | | Add Remove |
| | | | Add Remove |
| D. If amer | nding any other information, enter c | hange(s) here: (Attach additional sheets, if necessary.) | _ |
| - - | | | - |
| Dated | 14 of march | 2011 . Substitute of a member | |
| | | d, Laufer, Managing Member yped or printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00