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2000 MAR 27 A II: 38 SECRETARY OF STATE, ALLAHASSEE, FIORIE,

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Phoneplay LLC (Name of Limited Liability Company)	
(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:	
Alex Murao (Name of Person)	
(Firm/Company)	
OCCI C D I D I CHESE	
Miami Florida 33133/77 A (City/State and Zip Code)	
Mi Ser Assert	
Miami Florida 33/33/2002	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Λ_{\perp}	
(Name of Person) at (305) 282 7723 (Area Code & Daytime Telephone Number)	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)}	
the and the	
170 3	<u> </u>
MAILING ADDRESS: STREET/COURIER ADDRESS:	
Registration Section Registration Section Division of Corporations Division of Corporations	
P.O. Box 6327 Clifton Building	
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301	
Vocaments,	ىد

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

_ Kennan C	onsultina US	A.LLC
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on o orida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liabil	lity Company were filed on Nov.	3 th 1999 and assigned
Florida document number L990000 83	<u>354</u> .	
This amendment is submitted to amend the following		ZOOB MAR 27 A SECRETARY OF ALLAHASSEE, F
A. If amending name, enter the new name of the	e limited liability company here:	
PI	noneplay, LLC	
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Company," th	e designation "LLC" or the abbreviation
B. If amending the registered agent and/or negistered agent and/or the new registered office	_	cords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Fl	orida street address)
_		, 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:

	<u>Name</u>	Address Type of Act
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). If amend	ing any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary.)
). If amend	ing any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary.)
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	March 26, 2	

Page 2 of 2

Filing Fee: \$25.00