M05000001906

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. KOHR

APR 16 2009

EXAMINER

FILED
09 APR 16 PM 3:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: **04-16-09**

NAME: CBT DIRECT, LLC

TYPE OF FILING: **AMENDMENT**

COST: **$55**

RETURN: **CERTFIED COPY**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACCOUNT: **FCA000000015**

AUTHORIZATION: **ABBIE/PAUL HODGE**

1st

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

FILED
09 APR 16 PM 3:15
TALLAHASSEE, FLORIDA

SECTION I (1-3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State: CBT Direct, LLC

2. Jurisdiction of its organization: Delaware

3. Date authorized to do business in Florida: 4/12/2005

SECTION II (4-7 complete only the applicable changes)

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? 4/ /2009

5. New name of the limited liability company: River Ridge Training, LLC
(must end with "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")

6. If the amendment changes the period of duration, indicate new period of duration:

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment corrects any false statement, indicate the statement being corrected and the correction:

9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Signature of a member or the authorized representative of a member

David Parkinson
Typed or printed name of signee

Filing Fee: $25.00

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "CBT DIRECT, LLC", CHANGING ITS NAME FROM "CBT DIRECT, LLC" TO "RIVER RIDGE TRAINING, LLC", FILED IN THIS OFFICE ON THE FIFTEENTH DAY OF APRIL, A.D. 2009, AT 5:41 O'CLOCK P.M.

Jeffrey W. Bullock, Secretary of State

3944367 8100

090366884

AUTHENTICATION: 7247801

DATE: 04-15-09

You may verify this certificate online at corp.delaware.gov/authver.shtml

State of Delaware
Secretary of State
Division of Corporations
Delivered 05:41 PM 04/15/2009
FILED 05:41 PM 04/15/2009
SRV 090366884 - 3944367 FILE

STATE *of* DELAWARE
CERTIFICATE *of* AMENDMENT
to
CERTIFICATE *of* FORMATION

IT IS HEREBY CERTIFIED THAT:

1. The name of the limited liability company (hereinafter called the "*limited liability company*") is:

CBT DIRECT, LLC

2. The certificate of amendment to certificate of formation of the limited liability company is hereby amended by striking out Article I thereof and by substituting in lieu of Article I the following new Article:

"I.

NAME

The name of the limited liability company is RIVER RIDGE TRAINING, LLC (the "*Company*")."

Executed on April 15, 2009

/s/ David Parkinson
David Parkinson, Authorized Person