

State of Missouri Denny Hoskins, Secretary of State

Corporations Division PO Box 778 / 600 W. Main St., Rm. 322 Jefferson City, MO 65102

Amendment of Articles of Organization

(Submit with filing fee of \$25.00)

Charter #: _____

1. The current name of the limited liability company is:

2. The effective date of this document is the date it is filed by the Secretary of State of Missouri unless a future date is otherwise

indicated:

(Date may not be more than 90 days after the filing date in this Office)

3. State date of occurrence that required this amendment:

Month/Day/Year

4. The articles of organization are hereby amended as follows:

5. (Check if applicable) This amendment is required to be filed because:

- □ management of the limited liability company is vested in one or more managers where management had not been so previously vested.
- □ management of the limited liability company is no longer vested in one or more managers where management was previously so vested.
- \Box a change in the name of the limited liability company.
- □ a change in the time set forth in the articles of organization for the limited liability company to dissolve.
- □ adding a series under section 347.039 RSMo. (Form LLC 1A must be attached.)

6. This amendment is (check either or both):

- □ authorized under the operating agreement
- □ required to be filed under the provisions of RSMo Chapter 347

7. Principal Office Address (OPTIONAL) of the limited liability company (PO Box may only be used in addition to a physical street

address): ____

Address (PO Box may <u>only</u> be used in conjunction with a physical street address)

(Please see next page)

Name and address to return filed document:
Name:
Address:
City, State, and Zip Code:

In Affirmation thereof, the facts stated above are true and correct:

(The undersigned understands that false statements made in this filing are subject to the penalties provided under Section 575.040, RSMo)

Authorized Signature	Printed Name	Date
Authorized Signature	Printed Name	Date
Authorized Signature	Printed Name	Date

Authorized Signature

Printed Name