

Click here to clear form. AMENDMENT TO CERTIFICATE OF ORGANIZATION JAN 16 AM 8: 52

O TOP		LIABILITYCO		UL	CRETARY O	F STATE	
,		s on back of application	on)	7 1	STATE OF I	JAHU	
The nam	e of the limited liab	oility company is:					
		FEBSI, LLC	<u> </u>				
The date	The date the certificate of organization was filed wa			/as: November 14, 2008			
The nam	ne of the limited liat	oility company is amer	nded to I	read:		:	
		FEDERAL BENEFITS ED	UCATO	RS, LLC			
The nam	e and address of t	he managers/membe	rs shall l	oe amend	ded as follo	ows:	
7	lame	<u>Address</u>		Add	<u>Delete</u>	<u>Other</u>	
				-			
Signatur	e of an authorized	person.					
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ned Name	DAVIS		as#cfa			2009 05:	