

LD4000068672

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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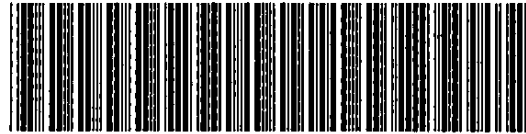
(Business Entity Name)

(Document Number)

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06 AUG 18 AM 10: 59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOV 21 2006

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Emilio A Maldonado LLC  
(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:

Emilio A. Maldonado  
(Name of Person)

Emilio A. Maldonado LLC  
(Firm/Company)

1089 SW 131 Place Court  
(Address)

Miami, Fl. 33184  
(City/State and Zip Code)

For further information concerning this matter, please call:

Emilio A Maldonado at ( 786 ) 306-7833  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$25.00 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  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

FILED  
06 AUG 18 AM 10: 59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Emilio A. Maldonado LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 08/11/2006 and assigned document number L04000068672.

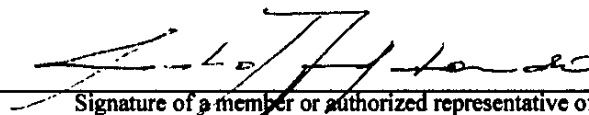
**SECOND:** This amendment is submitted to amend the following:

When above document was filed, the name of the officer (MGRM) was improperly entered as Nancy Andres.

By means of this document, it should be amended to her present married legal name, Nancy Maldonado.

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated 08/15, 2006.

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

**Emilio A Maldonado**  
\_\_\_\_\_  
Typed or printed name of signee

Filing Fee: \$25.00