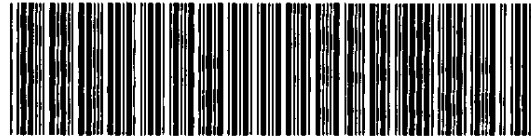


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07/08/10--01011--017 **35.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. HAWKES

JUL 27 2010

EXAMINER

S. HAWKES

JUL 28 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 9, 2010

AQOJTINTO CALCODA
555 NE 15TH ST 200
MIAMI, FL 33132

SUBJECT: LA GORCE, LLC
Ref. Number: L06000074654

We have received your document for LA GORCE, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 410A00016721

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LA GORCE 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:

Agostinho Calçada
Name of Person

LA Gorce LLC
Firm/Company

555 NE 15th St #200
Address

Miami FL 33132
City/State and Zip Code

Agosplanet@planet.southfla.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALLAN KOLTER, CPA at (305) 374-0041
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)

**Already
Paid \$35
(See Attached
Letter)*

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**

LA Gore LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 7/27/2006 and assigned Florida document number LO6000074654

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida 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:

MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	Nicolas Laurent Cornillot	555 NE 15th St #200 Miami FL 33132	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Christian Goerloff	1504 Bay Rd #3302 Miami Beach FL 33139	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM (member)	Agostinho Calçada	555 NE 15th St #200 Miami FL 33132	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM (member)	Alfonso Torres	555 NE 15th St #200 Miami FL 33132	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

JUL 26 11:15
 FILING

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)

Dated _____

Signature of a member or authorized representative of a member

Agostinho Calçada

Typed or printed name of signee