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TALLAHASSEE, FIRE

M. THOMAS

APR 1 0 2009

EXAMNER

COVER LETTER

TO: Registration Section Division of Corpor			
SUBJECT:		TED SERVICES, LLC (ted Liability Company)	
The enclosed Articles of Am	endment and fee(s) are sub-	mitted for filing.	
Please return all corresponde	nce concerning this matter	to the following:	
	JAIRO E	MILIANI (Name of Person)	
	SPEEDY PA	ARALEGAL SER	LVICES, INC
-	2010 5W	(Firm/Company) 23 rd 5+ (Address)	
-	MIXMI, F	FL 33145 (City/State and Zip Code)	
For further information conce	erning this matter, please ca	all:	
JAIRO E.M. (Name of Pe	NILIANI erson)	at (305) 859-84 (Area Code & Daytime T	537 Celephone Number)
Enclosed is a check for the fo	ollowing amount:		APR THAS
\$25.00 Filing Fee	1\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certificate Copy (additional copy) and copy (additional copy) are considered.

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

RILR	ELATE	D SERVIC	Es, LLC
(Name of the Limited Lia (A Flo	bility Company : rida Limited Liab	as it now appears on our ility Company)	r records.)
The Articles of Organization for this Limited Liabil Florida document number	lity Company we	ere filed on OC/2	21/2007 and assigned
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the			
PUBLIC ADJUSTES	RS RELA	ITED SERVIC	E5, LLC
The new name must be distinguishable and end with the "L.L.C."	e words "Limited	Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	e: _		<u> </u>
(Principal office address MUST BE A STREET A	DDRESS)		
	-		
Enter new mailing address, if applicable:	-		
(Mailing address MAY BE A POST OFFICE BO)	<u>X)</u>		29E
	-	and the state of t	
B. If amending the registered agent and/or registered agent and/or the new registered office		e address on our rec	ords, enter the name of the new
registered agent and/or the new registered office	audress here.		LON THE TOTAL
Name of New Registered Agent:	.		<u> </u>
New Registered Office Address:			
	(Enter Florida street address)		
-		· · · · · · · · · · · · · · · · · · ·	_, Florida(Zip Code)
	((City)	(Zip Coae)

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

<u>Title</u>	<u>Name</u>		Address	Type of Action
MGR_	LINA GO	MEZ	31 SE 5th st #3	Add Remove
				Add Remove
				Add Remove
				Add Remove
				Add Remove
		<u>.</u>		S Add 9
D. If amer	nding any other infor	mation, enter chan	ge(s) here: (Attach additional sheets	if necessary FOR AMILES
Dated	04/0	3 20	<u>∞9</u> . √	
	JA/	RO EMIL	d or printed name of signee 20	and legisl
	SPEEDY PARALEGAL 2010 SW 23 MIAMI, FL TEL: (305) 88	BRD ST □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Page 2 of 2 Filing Fee: \$25.00	54