

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((田090001142883)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this

page. Doing so will generate another cover sheet.

Division of Corporations

: (850)617-6383 Fax Number

Account Name : DORAL CORPORATE FILING SERVICE

Account Number : I2007000081 Phone : (305)436-0979

Fax Number : (305)592-5575

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

CARDAN GROUP, LLC.

Certificate of St	atus	0
Certified Copy		0
Page Count		03
Estimated Char	ge	\$25.00

Electronic Filing Menu

Corpo G. FM DE EOD

Help

MAY - 6 2009

5/5/2009

r aged

HP LASERJET FAX

75:52 6005 +0 eeM

https://efile.sunbiz.org/scripts/efilcovr.exe

(((H09000114288 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



(Name of the Limited Linki	DAN GROUP, LLC.	on our records	
(A Florid	la Limited Liability Company)	UNI VAL LECOTUS.	•
		00/04/0000	
The Articles of Organization for this Limited Liability		06/04/2008	and assigned
Florida document numberL08000055526	·		
	`		
This amendment is submitted to amend the following	•		
A. If amending name, enter the new name of the l	imited liability company here:	:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company	y," the designation "LLC	" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DEFCO		
			
			,
Enter new malling address, if applicable:		 	
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>		
,			
	·		
B. If amending the registered agent and/or re	gistered office address on ou	r records, enter the	name of the new
registered agent and/or the new registered office a	<u>agress here:</u>		
	•	,	
Name of New Registered Agent:			· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:			•
	Enter Florida street address		5
· .	7913		
- 	City	, Florid a	Zip Code
New Registered Agent's Signature, if changing Regist	•		- ,
New Register of Agent S Digital of It Champing Regist	ETEN AREIN		
I hereby accept the appointment as registered age the provisions of all statutes relative to the proper accept the obligations of my position as registered being filed to merely reflect a change in the registered	and complete performance of dagent as provided for in Cha tered office address, I hereby o	f my duties, and I am apter 608, F.S. Or, if i	familiar with and his document is

Page 1 of 2 (((H09000114288 3)))

If Changing Registered Agent, Signature of New Registered Agent

(((H09000114288 3)))

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:

<u>itle</u>	<u>Name</u>	Address	Type of Action
	•		□ Add
			Remove
			
<i>.</i> .			Add
			Remove
	,	, i	Add
			Remove
			Add Remove
	•	·	Add
			Remove
	· · · · · · · · · · · · · · · · · · ·		Add
. If amend	ling any other information, enter ch	nange(s) here: (Attach additional sheets, if necessary.)	
M	EMBERSHIP UNITS ARE AS F	FOLLOWS:	
<u>M</u>	GRM - DANIEL ZARLENGA - 5	50%	
M	3RM - CARLOS NAVARRO - 6	50%	
			
ated	MAY 05	2009	
atou		A A	
	Signature of a me	moet or authorized representative of a member	<u> </u>
	Signature of the	RICARDO DE LEO	
	1	yped or printed name of signee	
		Page 2 of 2	
		H09000114288 3)))	