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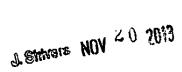
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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

7928 WEST DR. 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:

Joseph B. Ryan III, Esq.

Name of Person

Joseph B. Ryan III, PA

Firm/Company

8925 SW 148TH ST, SUITE 200

Address

MIAMI, FLORIDA 33176

City/State and Zip Code

JBRYANLAW@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSEPH B. RYAN III, ESQ.

305 444-4949

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)

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

/928 WEST DR. LLC (Name of the Limited Liability C	Company as it now appears on our records.) mited Liability Company)
(A Florida Lin	mited Liability Company)
The Articles of Organization for this Limited Liability Con	mpany were filed on 7/28/2010 and assigned
Florida document number L10000079455	<u>.</u>
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	ed liability company here:
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	1210 Washington Ave., #210
(Principal office address MUST BE A STREET ADDRE	Miami Beach, Florida 33139
	12
Enter new mailing address, if applicable:	1210 Washington Ave., #210
(Mailing address MAY BE A POST OFFICE BOX)	Miami Beach, Florida 33139
	.c
	in the second se
	red office address on our records, enter the name of the new
registered agent and/or the new registered office addre	ess here:
Name of New Registered Agent:	
New Registered Office Address: 1210	Washington Ave. #210 Unter Florida street address
_ M ¹	Mashington Hve. #210 Unter Florida street address 1 aui Beach, Florida 33139
•	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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Actio	<u>n</u>
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		Miami Beach, FL 33139		
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D. If	amendin	g any other	information,	enter change(s) here	: (Attach additional sheets, if n	ecessary.)
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Page 3 of 3

Filing Fee: \$25.00