Florida Department of State

Division of Corporations
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.

(((H11000022945 3)))



H110000228453ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, TNC.

Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)220-1440

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN UNO REAL ESTATE L.L.C.

TAN 27 PM 3: 08

COME TAN OF STATE

LANIASSEE, FLORIDA

Certificate of Status 0
Certified Copy 0
Page Count 03
Estimated Charge \$25.00

A. LUNT

JAN 28 2010

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

of I

01-27-11;12:57PM;eds

LAZAKUS

;305 551 0795

2/ 3 PAGE 01/03

H 1 1	00002294)	
ARTIC	LES OF AMENDME	NT	
	ro		For D
ARTIC	LES OF ORGANIZAT	TON	FE T
	OF	•	至
NO beater	tate I.C.		2011 JAN 27
(Name of the Limited Lin	bility Company 21 K now appeared to Limited Limited Limited Company)	Te an ner, (contact)	E G
The Articles of Organization for this Limited Liabil	lity Coropany were filed on	1/27/2011	and serion of
This amendment is submitted to amend the following	ng:		
A. If amending name, extends new name of the	e limited liability company be	<u> </u>	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Cots	pany," the designation "LLC	ortho abbreviation
Enter new principal offices address, if applicable	e:	·	
(Principal Office address MUST BE A STREET A	(DDIESS)		
Enter new mailing address, if applicable:			
• • • • • • • • • • • • • • • • • • • •	- <u></u>		<u> </u>
Mailing address MAX BE A POST OFFICE BO	<u> </u>		
B. If amending the registered agent and/or registered agent and/or the new registered office	regimered office address on address here;	our records, <u>enter the</u>	name of the new
Name of New Registered Agent:	·		
New Registered Office Address:		Enter Florida street addre	:3)
		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, P.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, Meastern of New Resistant Acend

Page 1 of 2

01-27-11;12:57PM;ads

;305 551 0785

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;

H11000022945

MGRM - Ma	maging Member		
Title MG/L	MARTHO VOZQUEZ	Address	Type of Action
MAR	MARTHON VOZOVEZ CARIO DIEZ	8180 NW 36 ST. STE 321 MIAMI FL: 33166	Add Remove
			Add Ressaye
·			Add Remove
			Add Rccoevs
•			Add Remova
D. If amend	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	THAHASSEE
	•	Λ	SE STATE OF
Dated		Hill I	
	- SFREIC	A brimed traine of signer The property of the	
		Page 2 of 2	