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BECRETARY OF STATE

N. Culligan SEP - 5 2013

COVER LETTER

Division of Cor	porations		
SUBJECT:	Optical	Portal LLC ed Liability Company	<u></u>
	Name of Limit	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
		•	
	Tatuana	Khominskay	a_
	Jonat	Name of Person	and the same of the same of
		Firm Company	
		r irm Company	
	19501 Col	ling Ave, #10	03
		Address	ayay yada yayatan ayaan ayaa ayaa ayaa aa aa aa aa aa aa aa aa
	Cunnula	les Beach, Fl City/State and Zip Code lgloptical@al be used for incure annual report notification	33160
	34//19/13	City/State and Zip Code	
	obtical	laloptical @ a	ol.com
	E-mail address: (to	be used for nuture annual report notificati	on)
For further information of	oncerning this matter, please ca		
<u> </u>			
lasyana 1	Chominstaya	at (<i>954</i>) 367 69 Area Code & Daytime Te	163 Tephone Number
O Name o	i Person	Area Code & Daytime Te	lephone Number
Enclosed is a check for th	re following amount:		
S25.00 Filing Fee	□\$30.00 Filing Fee &	DS55.00 Filing Fee &	□\$60.00 Filing Fee.
-	Certificate of Status	Certified Copy	Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

FILED

2813 SEP -4 AM 11: 53

SECRETARY OF STATE ⊅ALLAHASSEE, FLORIDA lability Company as it now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on 03/21/2011Florida document number <u>L 11 0000 33 52 4</u> 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

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.

Cirv

If Changing Registered Agent, Signature of New Registered Agent

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 Action Khominskaya Tatyana 17555 Atlantic Blvd, 1107 Add Sunny Isles Beach, Fl 33160 PRemove Remove Remove

D.	lf an	rending	any othe	r informatio	n, enter	change(s) h	ere: (Atto	ich addiri	onal sheets	, if necessa	n)
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Filing Fee: \$25.00

