

L12000066394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

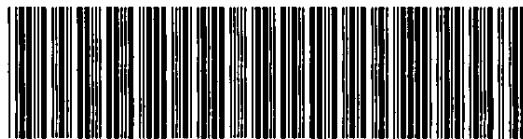
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

A

Office Use Only



200238374022

08/17/12--01016--022 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 AUG 17 PM 3:27

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PEN LAW 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:

ELEONORA TODARO
Name of Person

JET SET GROUP LLC
Firm/Company

860 COLLINS AVENUE UNIT 207
Address

MIAMI BEACH FL. 33139
City/State and Zip Code

INFO@JETSETGROUPLLC.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ELEONORA TODARO at 305 798-3095
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)
- \$60.00 Filing Fee, 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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 AUG 17 PM 3:27

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

PEN LAW LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
SECRETARY OF CORPORATION
DIVISION OF CORPORATIONS
12 AUG 17 PM 3:27

The Articles of Organization for this Limited Liability Company were filed on 5/16/2012 and assigned
Florida document number L 12000066394

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)

860 COLLINS AVENUE UNIT 207
MIAMI BEACH FL. 33139

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

860 COLLINS AVENUE UNIT 207
MIAMI BEACH FL. 33139

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:

860 COLLINS AVENUE UNIT 207
Enter Florida street address
MIAMI 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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	NATALIA BIANCHI	860 COLLINS AV # 207 MIAMI BEACH FL 33139	<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	VALTER MENCONI	860 COLLINS AV # 207 MIAMI BEACH FL 33139	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated AUGUST 12, 2012


Signature of a member or authorized representative of a member

Typed or printed name of signee