207000036788

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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
, (Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
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Certified Coples	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
ALLAHASSEF, FI ORIDA



COVER LETTER

TO: Registration Section Division of Corporations							
SUBJECT: RETAIL PARTNERS 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:							
MAUD POUDAT, ESQ (Name of Person)							
MANEY & GORDON, P.A. (Firm/Company) 9421 TRADEPORT DR. (Address) ORLANDO, FL 32827 (City/State and Zip Code)	Z001 OCT 10 P 2: 42 SECRETARY OF STATE TALLAHASSEE. FLORIDA						
For further information concerning this matter, please call:							
	at (407) 857-1300 (Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount: [\$\sumeq \text{\$\frac{1}{2}}\$ \$25.00 Filing Fee \text{\$\frac{1}{2}}\$ \$25.00 Filing Fee \text{\$\frac{1}{2}}\$ \$Certificate of Status \$\sumeq \text{\$\frac{1}{2}}\$ \$25.00 Filing Fee \text{\$\frac{1}{2}}\$ \$Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)						
MAILING ADDRESS: STREET/COURI Registration Section Registration Section							

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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(Present Name)
(A Florida Limited Liability Company)

FIRST:	The Articles of Organization were filed on 04/06/2007 and document number L07000036788	assigned	
SECOND:	This amendment is submitted to amend the following: MR. HUSNI AL SAMADI IS A MANAGING MEMBE	R EFFECTIV	Έ
	10/05/2007.		_
•		2001 (SECR	_ _
		OCT 10 F RETARYOU AHASSEE.	
		P 2: 42 F STATE FLORIDA	- 0 -
			
Dated <u>10</u>	Signature of a member or authorized representative of a mem	nber	_
	HUSNI AL-SAMADI Typed or printed name of signee		

Filing Fee: \$25.00