

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

Front

Account Name : RITTER, ZARETSKY & LIEBER, LLP

: (305)704-8111

Account Number : I20010000015 : (305)372-0933 Fax Number

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

Email Address: Vivian Dv zllaw.com

P/LLLP AMENDMENT/RESTATEMENT/CORRECTION EASY GRASS, LLC

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Electronic Filing Menu Corporate Filing McnG. MCLEOD

JUN - 3 2011

EXAMINER

Jun. 1. 2011 4:55PM

Ritter, Zaretsky & Lieber, LLP.

No.8263 P. I



John A, Ritter (1942-2010) Louis D, Zaretsky Oren Lleber* Vivian A, Jaime Elena Otero *Also Admitted to New York Bar 2915 Biscayne Blvd Suite 300 Mtaml, FL 33137 305-372-0933 Phone 305-704-8219 Fax www.rzllaw.com

E-Fax: 305-704-8219 E-Mail: omolina@rzilaw.com

Date:

June 1st, 2011

To:

FLORIDA DEPARTMENT OF STATE

Receiver's Fax No:

850-617-6380

From:

Olga Molina, Paralegai

Re:

EASY GRASS, LLC

Number of Pages: 5

The contents of this communication are attorney-client privileged and should be treated as confidential.

Good Morning:

Attached are copies of the following documents, with regard to the above captioned matter:

1. Electronic Filing Cover Page, Cover Page and the filing of the amendment.

Please send the amendment confirmation to Olga Molina, via Fax No. 305-704-8219.

Should you have any questions or need further documentation, do not hesitate to contact me at your convenience.

Jun. 1. 2011 4:55PM

Ritter, Zaretsky & Lieber, LLP.

No.8283 P. 3

COVER LETTER

	ration Section on of Corporations
SUBJECT:	Easy Grass LLC Name of Limited Liability Company
The enclosed A	ricles of Amendment and fee(s) are submitted for filling.
Please return all	correspondence concerning this matter to the following:
	Vivian Jaime ESA.
	Ri Her Zavetsky & Lieber LLP
	2915 Bis cayne Blva suite 300
	Miami F1. 33137 City/State and Tip Code
	Vivian Drzllaw.com
	E-mail address: (to be used for finure annual report notification)
For further infor	mation concerning this matter, please call:
Vivic	And Jaime, ESA at 305 372 - 0933 Name of Person Area Code & Daytime Telephone Number
	Name of Person Area Code & Daytime Telephone Number
Enclosed is a cho	eck for the following amount:
\$25.00 Filing	For \$30.00 Filing For & \$55,00 Filing Fee & \$560.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section

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

Jun. 1. 2011 4:55PM

Ritter, Zaretsky & Lieber, LLP.

No.8263 P. 4

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u>Easy Gro</u>			
(Name of the Limited Hability Co (A Florida Lim	ompany as it now appears, lited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Com Florida document number 1080001167	ppany were filed on	31/2008 and assigned	
This amendment is submitted to amend the following:	•		
A. If amending name, enter the new name of the limited	llability company here:		
N/A			
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company	"the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	NA		erwir?
(Principal office address MUST BE A STREET ADDRES	<u> </u>	NOT I	المسلمة المسلمة
	<u> </u>		
Enter new mailing address, fapplicable:			
(Mailing address MAY BE A POST OFFICE BOX)		900	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		r records, enter the name of the new	
Name of New Registered Agent:	N/A	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	Enter	· Florida street address	
	. Florida		
,	Clty	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

MGR = Manager

Jun. 1. 2011 4:55PM Ritter, Zaretsky & Lieber, LLP.

No.8263 P 5

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:

MGRM = Managing Member Title <u>Name</u> <u>Address</u> Type of Action Raul Martine Z MGMR 7296 SW1465Tavde Remove LPV 🔲 ☐ Remove ∏ Add Remove Remove DbA□ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) <u>june isī</u> Signature of a member or authorized representative of a member Vivian Jaime, authorized Representative.
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00