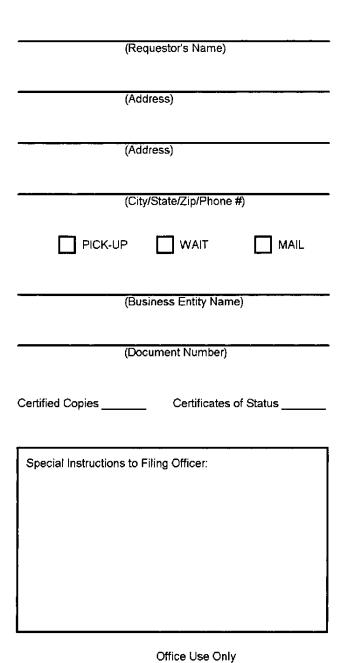
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B. BOSTICK
SEP 28 2011
EXAMINER

## **COVER LETTER**

TO:	Registration Division of C		
SUBJI	ECT:	FRIENDSHIP H	OLDINGS GROUP, INC.
30201	<u>.</u>		nited Liability Company
The en	closed Articles	of Amendment and fee(s) are so	ubmitted for filing.
Please	return all corres	spondence concerning this matte	er to the following:
		PE	ETER A. BLANCO, ESQ.
			Name of Person
		LAW OFFIC	DES OF PETER A. BLANCO, P.A.
			Firm/Company
7700 N. KENDALL DRIV			KENDALL DRIVE, SUITE 601
		,	Address
		MIAMI, FLORIDA 33156	
			City/State and Zip Code
			AB@PABLAWPA.COM (to be used for future annual report notification)
For fur	ther information	n concerning this matter, please	call:
	PET	TER A. BLANCO	at (305) 271-6963
	Name	e of Person	Area Code & Daytime Telephone Number
Enclose	ed is a check for	r the following amount:	
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fec & S60.00 Filing Fec, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)  (additional copy is enclosed)
	Regi Divi: P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 thassee, 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 **OF**

FRIENDSHIP HOLDIN	IGS GROL	JP, INC.	- <u>-</u>					
(Name of the Limited Liability Company (A Florida Limited Lia	ras it now appeability Company)	<u>ars on our record:</u> )	<u></u> )					
The Articles of Organization for this Limited Liability Company were filed onJULY 18, 2011 and assigned								
Florida document number L 11000082042								
This amendment is submitted to amend the following:								
A. If amending name, enter the new name of the limited liabili	ity company lie	ere:						
FRIENDSHIP HOLDINGS GROUP, LLC (to correct								
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Comp	pany," the designat	ion "LLC" or the ab	breviation				
Enter new principal offices address, if applicable:								
(Principal office address MUST BE A STREET ADDRESS)			<u> </u>					
		·	SET SET	- Carrier of				
			ASS	- 2020				
Enter new mailing address, if applicable:			<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
(Mailing address MAY BE A POST OFFICE BOX)			770	فر <sub>وورا</sub> ا				
			<u> </u>					
		_	A					
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:		our records, en	ter the name of	the new				
	•		,					
Name of New Registered Agent:								
New Registered Office Address:								
	E	nter Florida stree	et address					
		, Florid						
•	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> Type of Action \_ Add Remove Remove Add Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) SEPTEMBER 22 Dated Signature of a member or authorized representative of a member PEDRO (PETER) A. BLANCO, ESQ Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00