## LI1000105022

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## COVER LETTER

TO:

Registration Section Division of Corporations

Sole 1902, 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:

Ross Zalkind

Name of Person

Rosenfield & Zalkind, P.L.

Firm/Company

4601 Sheridan St., Ste 200

Address

Hollywood, FL 33021

City/State and Zip Code

rzalkind@globalamericatitle.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ross Zalkind

at (954) 620-1100

Area Code & Daytime Telephone Number

Name of Person

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sole 1902, LLC		
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our ited Liability Company)	records.)
The Articles of Organization for this Limited Liability Com Florida document number <u>L11000105022</u>		and assigned
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 " "L.L.C."	Limited Liability Company," the de	esignation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u>S)</u>	28
	********	- 2 - 5
Enter new mailing address, if applicable:		\$ 50 July 1
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		ds, enter the name of the new
Name of New Registered Agent:	404	
New Registered Office Address:		
	Enter Florida	street address
		Florida
	City	Zip Code

company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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

New Registered Agent's Signuture, if changing 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>	Address	Type of Action
MGRM	Carla Padua Andrade Chaves Cruz	SQSW 305 BLOCO H APT. COS - SUDDESTE BRASILIA - BRAZIL, DF 78673—126 BF	Add
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If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ed	Lune 21st 2013.
	ane ( ).
,	Signature of a member or authorized-representative of a member  RCA250 MA-CHASO CLUZ
	Typed or printed name of signee

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Filing Fee: \$25.00

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