

From: Law Offices

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11/06/2011 9:27

#26 P.001/004

11/8/13

L13000148153

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : LARREA & ORTEGA, P.A.
Account Number : I20010000067
Phone : (305) 476-8701
Fax Number : (305) 476-8721

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

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MUHAL LLC**

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

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SECRETARY OF STATE
TALLAHASSEE FLORIDA
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H13000246649 3

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

MUHAL LLC

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

The Articles of Organization for this Limited Liability Company were filed on October 21, 2013 and assigned Florida document number L13000148153

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 "LLC."

Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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: _____

Enter Florida street address

City Florida 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

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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

Title	Name	Address	Type of Action
MGR	Richard Halfen	96 Golden Beach Dr.	<input type="checkbox"/> Add
		Golden Beach, FL 33160	<input checked="" type="checkbox"/> Remove
MGR	Ricardo Halfen	96 Golden Beach Dr.	<input checked="" type="checkbox"/> Add
		Golden Beach, FL 33160	<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

NOV 11 2013
 11:27 AM
 STATE OF FLORIDA
 DEPARTMENT OF REVENUE
 TALLAHASSEE, FLORIDA

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

Dated

Tania Murgiano

Signature of a member or authorized representative of a member

TANIA MURGIO

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

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