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(Re	equestor's Name)	1
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OCT - 5 2009

EXAMINER



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COVER LETTER

TO:	Registration Secti Division of Corpo		į.	•
SUBJE	ECT:	BRYCOR	HOLDINGS LLC	
		Name of Limit	ed Liability Company	
The en	closed Articles of An	nendment and fee(s) are sub-	mitted for filing.	
Please	return all correspond	ence concerning this matter	to the following:	
			Bryan Grosman Name of Person	
			Brycor Holdings	
			Firm/Company	
			1051 NW 3rd Street	
			Address	
		H	lallandale, FL 33009	
			City/State and Zip Code	
	,	bg (E-mail address: (to	Obrycorholdings.com o be used for future annual report notified	ation)
For fur	ther information con-	cerning this matter, please ca		
		n Grosman		58-2826
	Name of P	erson	Area Code & Daytime	Геlephone Number
Enclose	ed 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

BR' (Name of the Limited L (A F	YCOR HOI liability Compa Torida Limited I	LDINGS LLC ny as it now appears liability Company)	on our records.)		
The Articles of Organization for this Limited Lial Florida document number		were filed on	4/27/2001	and a	assigned
This amendment is submitted to amend the follows. A. If amending name, enter the new name of t	J	ility company here	10 0		
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ited Liability Compan	ny," the designation "	LLC" or the	e abbreviation
Enter new principal offices address, if applical	ble:	1051 NW 3RD	STREET		
(Principal office address MUST BE A STREET	ADDRESS)	HALLANDALE	, FL 33009		<u>≥</u>
Enter new mailing address, if applicable:				OCT -2 PH	FILED FILED OF CORE
(Mailing address MAY BE A POST OFFICE B	<u>0X)</u>	1051 NW 3RD HALLANDALE		- 08	STATE
B. If amending the registered agent and/or registered agent and/or the new registered offi			ur records, <u>enter</u>	the name	of the nev
Name of New Registered Agent:	BRYAN M.G	ROSMAN ESQ.			
New Registered Office Address: 1051 NW 3RD STREET Enter Florid				dress	
	HA	ALLANDALE City	, Florida	330 Zip Co	

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:

	Manager I = Managing Member	4 ~	
<u>Title</u>	<u>Name</u>	Address	Type of Action
	-		Add Remove
			Add Remove
			Add Remove
			Add Remove
			□Add □Remove
			Add Remove
D. If an	mending any other information, enter o	change(s) here: (Attach additional sheets, if necessary.)	
	PLEASE CHANGE ADDRESS C 1051 NW 3RD STREET, HALLA	DF MGRM BRYAN GROSMAN TO: NDALE, FL 33009	_
			_
Dated _	SEPT 29	2009. Groon	
	_	nember or authorized representative of a member	. _ .
		MICHELLE GROSMAN Typed or printed name of signee	<u> </u>

Page 2 of 2

Filing Fee: \$25.00