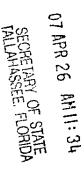
## LOI 0000008362

(Pa	equestor's Name)	
(Ace	Adearol a Maille)	
(Ac	Idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
— (Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		j
		1 2th
		- TO THE
	Office Use Only	$( \mathbb{W}$



400097746844

04/26/07--01017--022 \*\*55.00



## **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJE	CT: Santefe Enterprises, LLC (Name of Limited Liability Company)
The end	losed Articles of Amendment and fee(s) are submitted for filing.
Please r	eturn all correspondence concerning this matter to the following:
	Sandra Politi (Name of Person)  Santefe Enterprises (Firm/Company)
	Santefe Enterprises  (Firm/Company)  1950 Lee road Suite 102
	(Firm/Company)
	1950 Lee road, Suite 102
	(Address)  Winter Park, Florida 32789  (City/State and Zip Code)
For furt	her information concerning this matter, please call:
	Terri Williams at (_407) 765-7292
	(Name of Person) (Area Code & Daytime Telephone Number)
	It is a check for the following amount:  0 Filing Fee \$\ \text{Certificate of Status} \text{ \subseteq \text{S55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{ \text{Certified Copy (additional copy is enclosed)}} \text{ \text{Certified Copy (additional copy is enclosed)}}
	MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

41. 🖢

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Santefe Enterprises, LLC

	(Present Name) (A Florida Limited Liability Company)							
FIRST:	The Articles of Organization were filed on document number L01000008362 and assigned						l <b>⇒</b>	
SECOND:	This amendment is submitted to amend the following:							
	CHANGE MANAGER/MEMBER DETAIL TO							
	POLITI, SA	ANDRA 19	50 LEE	ROAD, S	UITE 102	, WINTE	R PARK, FL	· · · · · · · · · · · · · · · · · · ·
	TITLE N	/IGR						
	WILLIAMS	S, TERRI	1950 LE	EE ROAI	D, SUITE	102, W	NTER PAR	RK, FL
	TITLE N	MGR				_		
	CAMARG	O, FELIF	PE 1950	LEE RO	DAD, SI	JITE 102	2, WINTE F	PARK, FL
·	TITLE N	/JGR				- 1. 1		
			·····			<del></del>		<del>.</del>
		·····			·			
		·				<del></del>		
Dated AP	RIL 23		, <u>2</u>	2007				
	Tei	Signature	e of a memb	Lass per or authori	zed represen	ntative of a m	ember	
	TE	RRI WIL						
			Type	ed or printed	name of sig	nee		

Filing Fee: \$25.00