L01000020715

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2013 IAN 18 PH 1: 11

C. LEWIS

JAN 2 2 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

MAS HOLDING, 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:

ALFREDO F. AYME

Name of Person

MARTINEZ-AYME SECURITIES

Firm/Company

9495 SUNSET DRIVE B275

Address

MIAMI, FLORIDA 33173

City/State and Zip Code

AYME@MARTINEZAYME.COM

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

For further information concerning this matter, please call:

ALFREDO F. AYME

,305<u>,</u>271**-**3232

Name of Person

Area Code & Daytime Telephone Number

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)

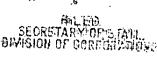
□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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 DIMISION OF GORDE **OF**



2013 JAN 18 PM 1: 11

MAS HOLDING, LLC

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

(A)	riorida Liinited L	nability Com	pany)		
The Articles of Organization for this Limited Lia Florida document number <u>L01000020715</u>	bility Company	were filed o	_{on} 11/26/2001	and assigned	
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of	the limited liab	ility compa	ny here:		
MAS CAPITAL HOLDINGS, LLC					
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability	Company," the designation "Ll	LC" or the abbreviation	
Enter new principal offices address, if applicable:		9495 S	UNSET DRIVE		
(Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		B275			
		MIAMI, FLORIDA 33173			
		9495 SUNSET DRIVE B275			
	MIAMI, FLORIDA 33173				
B. If amending the registered agent and/o registered agent and/or the new registered off	ice address her	<u>e</u> :	s on our records, <u>enter tl</u>	ne name of the new	
Name of New Registered Agent:	Name of New Registered Agent: ALFREDO F. AYME				
New Registered Office Address:	9495 SUNS	SET DRIV			
		Enter Florida street address			
	MIAMI	•	, Florida <u>3</u> 3	173	
		City		Zip Code	
New Registered Agent's Signature, if changing R	egistered 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

Page 1 of 3

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
MGMR -	ROBERT B. KAY	9101 W. SAHARA AVENUE	Add Add
		S-105-151	Remove
		LAS VEGAS, NEVADA 8911	7
MGR	ALFREDO F. AYME	9495 SUNSET DRIVE	Add
		B275	Remove
		MIAMI, FLORIDA 33173	3_
MGRM	REYNALDO A. MARTINEZ	9495 SUNSET DRIVE	
		B275	_ Remove
		MIAMI, FLORIDA 33173	<u>}</u>
			Add
			Remove
			_
			Add
			Remove
			_
			Add
			Remove
			-

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary, SECKINT SINISTON O	ARY OF LIKE	II. Yay
	18 PM 1:	
Dated		
Signature of a member of authorized representative of a member ALFREDO F. AYME Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00