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DIVISION OF CORPORATIONS
OF THE SECRETARY OF STATE OF CORPORATIONS
OF THE SECRETARY OF STATE OF STATE

J. BRYAN

DEC 3 1 2007

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: TEPEPA LC		
(Name of Limit	ted Liability Company)	
The enclosed Articles of Amendment and fee(s) are subr	nitted for filing.	
Please return all correspondence concerning this matter t	to the following:	
RAMIRO BOHORQU	EZ CEBALLOS	
	(Name of Person)	
	(Firm/Company)	
6365 COLLINS AVE,		SECRETARY OF STATIONS SECRETARY OF STATIONS OF DEC 28 AM 11: 54
	(Address)	C 28
MIAMI BEACH, FL. 3	3141	- P
	(City/State and Zip Code)	CORPORATIONS 8 AM 11: 54
For further information concerning this matter, please ca	II:	24 2048
RAMIRO BOHORQUEZ CEBALLOS (Name of Person)	at (305) (Area Code & Daytime	Felephone Number)
(Name of Leison)	(Area Coue & Dayume	receptione (value)
Enclosed is a check for the following amount:	_	
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status	S55.00 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	STREET/COURIER Registration Section	

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TEPEPA LC (Name of the Limited	Liability Company as it now appears Florida Limited Liability Company)	on our records.)			
(A	Florida Limited Liability Company)				
The Articles of Organization for this Limited Li	ability Company were filed on 3/28	/2002 and assigned			
Florida document number <u>L0200007363</u>	*	70			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of	A. If amending name, enter the new name of the limited liability company here:				
,		AH II: 54			
The new name must be distinguishable and end with "L.L.C."	n the words "Limited Liability Compan				
B. If amending the registered agent and/or registered agent and/or the new registered of Name of New Registered Agent:					
New Registered Office Address:	6365 COLLINS AVE, SUITE	<u> </u>			
	(Enter Florida street address)				
	MIAMI BEACH, FL.	Florida 33141			
	(City)	(Zip Code)			
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered the provisions of all statutes relative to the pracept the obligations of my position as registering filed to merely reflect a change in the recompany has been notified in writing of this of	d agent and agree to act in this cap roper and complete performance o stered agent as provided for in Cha egistered office address, I hereby o	<u>f my du</u> ties, and I am familiar with and apter 608, R.S. Or, if this document is			

of 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:

MGR = Mana MGRM = Mar	ger naging Member		
<u>Title</u>	Name	Address	Type of Action
MGR	RAMIRO BOHORQUEZ CE	6365 COLLINS AVE, SUITE 1401 MIAMI BEACH, FL 33141	Add Remove
MGR_	NELSON BARKER	2027 NE 121 RD NORTH MIAMI, FL. 33181	Add Remove
	MISTIQUEE, INC	170 SE 14 ST #2508 MIAMI, FL 33131	Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	FILED SECRETARY OF STATE NIVISION OF CORPORATIONS 07 DEC 28 AM II: 54
 Dated <u>12/27</u>	, 2007	authorized representative of a member	-
<u>N</u>	ELSON BARKER	•	
_	Typed or	printed name of signee	

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Filing Fee: \$25.00