

L020000010895

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

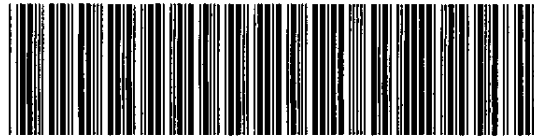
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
08 MAR 10 PM 2:08

J. BRYAN

MAR 12 2008

EXAMINER

**LF OF AMERICA, LLC**

3890 Pembroke Road  
Hollywood, Florida 33021  
Phone: 954-963-6226 - Facsimile: 954-963-6227

March 5, 2008

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DIVISION OF CORPORATIONS  
08 MAR 10 PM 2:00

**Florida Department of State  
Registration Section  
Division of Corporations  
Clifton Building  
2261 Executive Center Circle  
Tallahassee, FL 32301**

**RE: Filing of Amended Articles of Organization of LF OF AMERICA, LLC  
EIN: 04-3657912 - Removal and Addition of Members of the Board**

Dear Sir/Madam:

I wish to file the Amended Articles of Organization of LF OF AMERICA, LLC., to replace and add new Members of the Board as described in the accompanying documents.

Please find enclosed these Amended Articles of Organization as well as our Check # 3015 for \$ 55.00 payable to the Florida Department of State covering the corresponding:

- a) \$ 25.00 Filing fees.
- b) \$ 30.00 Certified copy

Under penalty of perjury, I declare that the facts presented in this amendment are, to the best of my knowledge and belief, true, correct, and complete.

Sincerely,



**Pablo E. Lopez**  
Authorized Representative of the Members

Enclosed: 1) AMENDED ARTICLES OF ORGANIZATION OF LF OF AMERICA, LLC  
2) Check # 3015

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: LF OF AMERICA, 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:

HECTOR J. LOPEZ-PARDO

(Name of Person)

LF OF AMERICA, LLC

(Firm/Company)

3890 PEMBROKE ROAD

(Address)

HOLLYWOOD, FLORIDA 33021

(City/State and Zip Code)

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DIVISION OF CORPORATIONS  
08 MAR 10 PM 2:08

For further information concerning this matter, please call:

HECTOR J. LOPEZ-PARDO

(Name of Person)

at ( 954 ) 963-6226

(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  
OF**

LF OF AMERICA, 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 MAY 7, 2002 and assigned  
Florida document number L02000010895

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DIVISION OF CORPORATIONS  
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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 "L.L.C."

**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)*

Florida

*(City)*

*(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)**

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

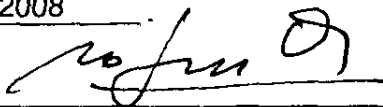
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>PRES</u>	<u>PABLO E. LOPEZ</u>	<u>3890 PEMBROKE ROAD</u> <u>HOLLYWOOD, FLORIDA 33021</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>V.PRE</u>	<u>GIOVANNI FERRARI</u>	<u>Via G. Verga, 1/27 Rovereto s/S</u> <u>Novi di Modena MO ITALY</u> <u>TREASURER</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>TREAS</u>	<u>ELIAS SOLINAS</u>	<u>Via G. Verga, 1/27 Rovereto s/S</u> <u>Novi di Modena MO ITALY</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>SECR.</u>	<u>ANTONIO FONTANA</u>	<u>Via G. Verga, 1/27 Rovereto s/S</u> <u>Novi di Modena MO ITALY</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGRM</u>	<u>RENZO ESTE</u>	<u>Via G. Verga, 1/27 Rovereto s/S</u> <u>Novi di Modena MO ITALY</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>SECR.</u>	<u>IGNACIO F. LOPEZ</u>	<u>3890 PEMBROKE ROAD</u> <u>HOLLYWOOD, FLORIDA 33021</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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Dated FEBRUARY 29, 2008



Signature of a member or authorized representative of a member

HECTOR J. LOPEZ-PARDO

Typed or printed name of signee