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2011 AUG 29 EM 2: 28
SECRETARY OF STATE

C. LEWIS

AUG 3 0 2011

EXAMINER

: أو لمونتسد

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: Organize Lady Organize Gentleman, 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:						
Elvira Moorer-Gethers						
Oganize Lady Organize Gentleman, LLC						
P.O. Box 100113						
Fort Lauderdale, FL 33310						
Waggteo (a) Yahov. Com E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Elvira Mookek-Gethers at 954 303-4149 Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount:						
\$25.00 Filing Fee Certificate of Status \$30.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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

23

	TO	FILED	
ARTICLES	OF ORGANIZATION	ILED	
Organize Lady Org	off anize Den H Company as it now appears on omitted Liability Company)	2011 AUG 29 PM 2: 23 ECRETARY OF STATE OUT records.) TALE AHASSEE, FLORIDA	
The Articles of Organization for this Limited Liability Con Florida document number	npany were filed on <u>03</u>	- <u>21- 2003</u> and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company here:		
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," t	he designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	3451 N	W 19 Street	
(Principal office address MUST BE A STREET ADDRE.	Lauderdale	Lakes, FL 33311	
Enter new mailing address, if applicable:	P.O. BO	x 100113	
(Mailing address MAY BE A POST OFFICE BOX)	Fort Lauden	dale, FL 33310	
B. If amending the registered agent and/or registered agent and/or the new registered office address		ecords, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	Futor El	orida street address	
	City	, Florida Zip Code	
		p =p	

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Ma MGRM = N	nager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
 -			Add Remove
			Add Remove
D. If amend	ding any other information, enter chang	e(s) here: (Attach additional sheets, if necessary,	<i>)</i>
			2011 AUG 29 EM 2: 23 SECRETARY OF STATE TALLAHASSEE. FLORIDA
Dated	8-25-, 20	or authorized representative of a member	29 EH 2: 23 ARY OF STATE SSEE, FLORIDA
	- Elvira 1	OORER-Gethers or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00