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D. BRUCE

DEC 14 2009

EXAMINER

COVER LETTER

то:	Registration Secti Division of Corpo			
SUBJI	ECT:	ALEK	A LLC.	
		(Name of Lim	ited Liability Company)	
The en	closed Articles of An	nendment and fee(s) are sub	mitted for filing.	
Please	return all correspond	ence concerning this matter	to the following:	
		Eveli	Name of Person)	<u>/</u>
			Pleka LLC (Firm/Company)	
		2034 Ta	rglewood DR PE	<u> </u>
		ST. PETE	RSBURY, FL 2 (City/State and Exp Code)	3702 E8 8
For fu	ther information cond	erning this matter, please c	all:	OEC TA
E	Veling V. (Name of F	VASSILEV Person)	at (727) 48/-90 (Area Code & Daytime Tele	phone Number) FS A 3
Enclos	ed is a check for the t	following amount:		
\$ \$2:	5.00 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

ALei	LA LLC	
(Name of the Limited Lia (A Flo	bility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liabil Florida document number <u>L030000170</u>		and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the designation	"LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office	<u>—</u>	the name of the new
Name of New Registered Agent:		SR SR
New Registered Office Address:	(Catan Florida de cata	五 至 四
	(Enter Florida street a	aurenta 3: 16
_	(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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action			
MGRM	THEOdore F. HASENSTAUB	9728 Groveland ST Senivole FL 33772	Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
			09 DE Remove			
D. If ame	nding any other information, enter change((s) here: (Attach additional sheets, if necessary.)	LED PH 3:16			
-			_			
Dated	Dec. 8, 200	<i>29</i> .	_			
	Signature of a member of	or authorized representative of a member				
Eveling V. VASSILEV Typed or printed name of signee						

Page 2 of 2

Filing Fee: \$25.00