L03000031098

(Red	questor's Name)			
•				
(Add	iress)			
(Address)				
(City	//State/Zip/Phone	e #)		
,	•	•		
	_	_		
PICK-UP	☐ WAIT	MAIL		
(Bus	siness Entity Nar	ne)		
(Dus	iness Endry Ival	ne)		
(Doc	cument Number)			
Certified Copies Certificates of Status				
	, <u></u>			
Chariel Instructions to Filing Officer				
Special Instructions to Filing Officer:				
		1		
1]		

Office Use Only



500038327685

07/12/04--01008--006 **25.00

2004 JUL 12 PM 3: 29

2004 JUL 12 PM 3: 29

DIVINION OF CORPORATIONS

TRANSMITTAL LETTER

TO: Registration Se Division of Co	ection rporations		
SUBJECT:	Name of Li	mited Liability Company)	
	f Amendment and fee(s) are sui	•	IN UL 12 PA
,	Ellen S	Name of Person)	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
	ersified Fine	Name of Person) Aucia / Services Firm/Company)	Jue
	1971 S.E. F	(Address)	Blud
<u>· · · ·</u>	Port Sr /u (City)	CI = FC 3498 (State and Zip Code)	<u>.</u>
For further information concerning this matter, please call:			
E11+a	(Name of Person)	at (<u>212</u>) <u>333</u> (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)

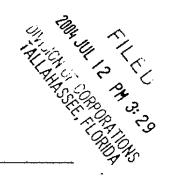
STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



ONDA Furnesses LLC
(Present Name)
(A Florida Limited Liability Company)

FIRST: The Aticles of Organization were filed on Aug 15, 2003 and assigned document number Lo3000031098.

SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

ADD: RAYMUNDO MARTÍZEZ MANDEZ:

8604 Salarno Rd

Fort Pierce FL 34951

AS A MANAGER to the Above named entity

Dated July 9, 2004

Signature of a Member or Authorized Representative of a Member

Revald Diviz
Typed or Printed Name of Signee

Filing Fee: \$25.00