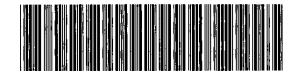
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SECRETARY OF STATE FALLAHASSEE, FLORIDA

T. HAMPTON

SEP 2 3 2008

EXAMINER

COVER LETTER

Division of Corporations				
SUBJECT: Prodigy Development Sates, WC (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:				
Gianca Martineu (Name of Person)				
Prodigy Development Sales, LLC (Firm/Company)				
31 S.E. 5th Street, # CUZI5				
Miami, FL 3331 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Bianca Martineu at (305, 379 - 4424 (Name of Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)				

MAILING ADDRESS:

TO:

Registration Section

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

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Prodigy Develope (Name of the Limited Liability Comban (A Florida Limited L	ment vates, uc
The Articles of Organization for this Limited Liability Company Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	31. S.E. 5th street, # CU215 Miami, FL 33131
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	31 S.E. 5 th strect suite CU 215 Miami, IFC 33131
B. If amending the registered agent and/or registered off 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 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> Type of Action 18660 COllins Ave, #107 nsnat Remove Sue M. Alper Rodrigo Nino 31 SE. 5th Street, #CU215 BISE. 5h street #CUZIS Add ctange Miami FL B3131 Remove address Remove _ Add ☐ Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member ROdrigo Nino
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00