

| (Re | equestor's Name) | |
|-------------------------|--------------------|--|
| (Ac | ldress) | |
| (Ac | ldress) | |
| (Cit | ty/State/Zip/Phone | #) |
| PICK-UP | WAIT | MAIL MAIL |
| (Bu | isiness Entity Nam | e) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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| | Office Use Only | $\mathcal{L}_{\mathcal{L}}}}}}}}}}$ |



02/22/07--01011--014 **30.00

COVER LETTER

| TO: | Registration Section |
|-----|--------------------------|
| | Division of Corporations |
| | |

| Division of Corporations | |
|---|-------|
| SUBJECT: PaJARES Quintana 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: | |
| | |
| Yosvani Quintana (Name of Person) | |
| (Name of Person) | |
| PaJAnes QuinTana LLC (Firm/Company) | |
| (Firm/Company) | |
| 5849 S.W. 144th Cincle Place (Address) | |
| (Address) | |
| | |
| (City/State and Zip Code) | |
| ASS. | _ |
| For further information concerning this matter, please call: | יירני |
| For further information concerning this matter, please call: $ \frac{M(9m)}{(\text{City/State and Zip Code)}} $ For further information concerning this matter, please call: $ \frac{\sqrt{SS9n}}{(\text{Name of Person})} $ $ \frac{33173}{(\text{City/State and Zip Code)}} $ $ \frac{33173}{(\text{Area Code & Daytime Telephone Number)}} $ $ \frac{33173}{(\text{Area Code & Daytime Telephone Number)}} $ | C |
| (Name of Person) (Area Code & Daytime Telephone Number) | |
| | |
| Enclosed is a check for the following amount: | |

\$55.00 Filing Fee &

(additional copy is enclosed)

Certified Copy

MAILING ADDRESS:

\$30.00 Filing Fee &

Certificate of Status

\$25.00 Filing Fee

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

STREET/COURIER ADDRESS:

\$60.00 Filing Fee, Certificate of Status &

(additional copy is enclosed)

Certified Copy

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301





FLORIDA DEPARTMENT OF STATE Division of Corporations

February 23, 2007

YOSUANI QUINTANA 5849 S.W. 144TH CIRCLE PLACE MIAMI, FL 33183

SUBJECT: PAJARES QUINTANA, LLC

Ref. Number: L03000054127

We have received your document for PAJARES QUINTANA, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your entity was administratively dissolved or its certificate of authority revoked for failure to file the annual report/uniform business report as required by law. To reinstate this entity complete the enclosed application/report form.

The fees to reinstate the limited liability company are as follows: \$100 reinstatement fee; and \$50 filing fee per year. Please include an additional \$5 for each certified of status requested.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 307A00013435

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| _ | PAJAROS QUINTANO LLC (Present Name) (A Florida Limited Lightling Company) | | _ | |
|---------|--|-----------------------------|-------------|--|
| | (A Florida Limited Liability Company) | | | |
| | | | | |
| FIRST: | The Articles of Organization were filed on <u>Deamler</u> 19, 2003 and assigned document number <u>403 000054127</u> . | | | |
| SECOND: | This amendment is submitted to amend the following: | | | |
| | I want to change the name of my | Llc | <u>-</u> | |
| | To be: | | | |
| | Yosvani STairs LLC | ≅co | .07 | |
| | 5849 S.W. 1444h cincle Place | | 07 MAR | |
| | I want to change the name of my To be: Yosvani Stairs LLC 5849 S.W. 1444h Cincle Place Miami Floria 33183 | TARY | 7 | |
| | 305-907-4081 | . F. S - S - S - S | - K | |
| | | TAIL PROA | - 9: 25 | |
| | | | ~, | |
| | | | _ | |
| | | | _ | |
| Dated | February 20, 2007. | | - | |
| | Signature of a member or authorized representative of a member | | | |
| | Yosvani Quintane | | | |

Filing Fee: \$25.00