

L03000056061

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

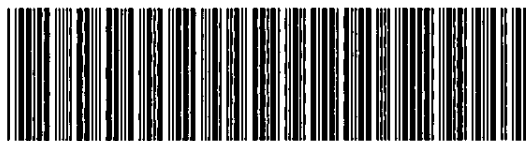
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12 FEB 29 PM 4:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LOURDES CORVO, P.A.

PERLA SOLÉ CALAS, P.A.

ATTORNEYS AT LAW

A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS

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February 27, 2012

*Furnished via Federal Express 2nd Day Service
(Tracking No.: 8759 4299 6436)*

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

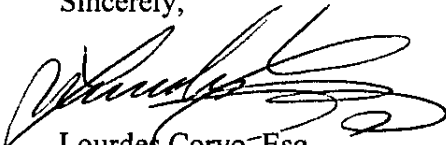
**RE: Paul & Ronnie, LLC
Florida Document No.: L03000056061**

To Whom It May Concern:

Enclosed herein please find the following original document: Articles of Amendment to Articles of Organization of Paul & Ronnie, LLC. In addition, enclosed herein please find Lourdes Corvo, P.A. check number 1680 in the amount of \$25.00. This amount reflects the filing fee associated with the Articles of Amendment.

Please do not hesitate to contact me should you have any further questions or concerns regarding this matter.

Sincerely,



Lourdes Corvo, Esq.

LC/hs

Enclosures (2)

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Paul & Ronnie, 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:

Lourdes Corvo, Esq.
Name of Person

Lourdes Corvo, P.A.
Firm/Company

15450 New Barn Road, Suite 302
Address

Miami Lakes, FL 33014
City/State and Zip Code

LC@corvopa.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lourdes Corvo at (305) 827-0084
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Paul & Ronnie, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12-26-2003 and assigned
Florida document number L03000056061

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation
"L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new
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 Changing Registered Agent, Signature of New Registered Agent

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TALLAHASSEE, FLORIDA

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>	<u>Type of Action</u>
--------------	-------------	----------------	-----------------------

MGRM	Ian Seaman	7601 NW 66 Street Miami, Florida 33166	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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P	Paul Seaman	7601 NW 66 Street Miami, Florida 33166	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
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MGRM	Paul Seaman	7601 NW 66 Street Miami, Florida 33166	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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<input type="checkbox"/> Add
<input type="checkbox"/> Remove

<input type="checkbox"/> Add
<input type="checkbox"/> Remove

<input type="checkbox"/> Add
<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated February 22, 2012

Paul Seaman

Signature of a member or authorized representative of a member

Paul G. Seaman

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00