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COVER LETTER

TO: **Registration Section Division of Corporations**

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International LLC SUBJECT: BUSINESS 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:

Caroling Kendeiru Business Centers INtenational LLC Firm/Company 1395 Brickell Ave Suite 800 Address city/State and Zin Code JUN 22 PH 1: mail address: (to be used for future annual report notification For further information concerning this matter, please call: Pndeino at (305) 542 0299 Area Code & Daytime Telephone Number " rirolina

Name of Persor

Enclosed is a check for the following amount:

P.O. Box 6327

\$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)

MAILING ADDRESS: Registration Section Division of Corporations Tallahassee, FL 32314

STREET/COURIER ADDRESS: **Registration Section Division of Corporations Clifton Building** 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT		
ТО		
ARTICLES OF ORGANIZATION		
OF		

LLC_ ed 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 <u>266. P, 2004</u> and assigned Florida document number <u>LO40000/3651</u>.

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:	<u>As</u> 0	
(Principal office address MUST BE A STREET ADDRESS)		Construction of the local division of the lo
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		-
Enter new mailing address, if applicable:		m
(Mailing address MAY BE A POST OFFICE BOX)		0
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B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Fl.	orida 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

Page 1 of 2

If amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager</u> <u>'or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

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<u>Title</u>	Name	Address	Type of Action
NGEM	Rightspacemong enent, LLC	2000 Ponce de heor Blu #600 Coral Gables 783313	Add X Remove
MERM	Right Space Inc	2000 Ponce de Leon Blu #600 Corrul Gubles FZ 331	Add Remove
			Add Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Dated JULAC 19 , 2009.	
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Signature of a member or authorized representative of a member	
Carpling Renderci)	
Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00