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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Sweet Hospitality, LL	.C			
			1	
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			<u> </u>	
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art. of Amend. File
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				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
			 	Fictitious Search
Signature	······································			Fictitious Owner Search
Signature				Vehicle Search
				Driving Record
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COVER LETTER

TO: Registration Division of	n Section Corporations		THOU IS PAY SO
SUBJECT:	Sweet I	Hospitality, LLC	(A)
		ited Liability Company	
The enclosed Articles	s of Amendment and fec(s) are su	bmitted for filing.	65
Please return all corre	espondence concerning this matte	r to the following:	
		Name of Person	
		lujber Law Group, P.A	
		Firm/Company	
	703 1	West Boynton Beach Blvd	
		Address	
	·	City/State and Zip Code	
	E-mail address: (nujber@hujberlaw.com to be used for future annual report notifi	cation)
For further information	on concerning this matter, please	call:	
Н	ussein Shehata	at (609)	933-4474
Nam	ne of Person	Area Code & Daytime	Telephone Number
Enclosed is a check fo	or the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Taliahassee, 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

05/14/2004 and assigned The Articles of Organization for this Limited Liability Company were filed on _____ L04000036652 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new pame 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 Morida City

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.

Zip Code

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>	Name	Address	Type of Action
<u>MGRM</u>	Dina Shehata	1442 NE 55Th ST Fort Lauderdale, FL 33334	Add Remove
*			Add Remove
			Add Remove
			Add Remove
			Add Remove
		· · · · · · · · · · · · · · · · · · ·	Add Remove
D. If amend	ing any other information,	enter change(s) here: (Attach additional sheets, if necessary.)	_
-			-
	November 14	, 2011 .	-
Dated	4	ten	
	Signature	member or authorized representative of a member	
		Ahmed Shehata Typed or printed name of signee	