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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CINTRON ENTERPRISES, 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:

GLORIA P. CINTRON  
(Name of Person)

CINTRON ENTERPRISES, LLC  
(Firm/Company)

11163 SILVER RIDGE STREET  
(Address)

WELLINGTON, FL 33467  
(City/State and Zip Code)

For further information concerning this matter, please call:

GLORIA P. CINTRON at (904) 317-1569  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:



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\$60.00 Filing Fee,  
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### 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**

CINTRON ENTERPRISES, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 10/13/2004 and assigned  
document number L04000074374.

**SECOND:** This amendment is submitted to amend the following:


REGISTERED AGENT: GLORIA PATRICIA CINTRON

11163 SILVER RIDGE STREET, WELLINGTON, FL 33467

MGRM: GLORIA PATRICIA CINTRON 11163 SILVER RIDGE STREET  
WELLINGTON, FLORIDA 33467

I HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES  
AND RESPONSABILITIES AS REGISTERED AGENT FOR SAID  
LIMITED LIABILITY COMPANY.

Dated APRIL 26, 2007



Signature of a member or authorized representative of a member

DONNA P MCCOY

Typed or printed name of signee

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07 MAY 25 PM 3:43  
SECRETARY OF STATE  
DIVISION OF CORPORATION

Filing Fee: \$25.00