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MAY - 5 2009

EXAMINER



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DIVISION OF CORT LOATION

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: BIGMAN 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:				
GEORGE KRITIS (Name of Person) BIGMAN ENTERPRISES, LLC (Firm/Company)				
173 WICKHAM ROAD (Address)				
City/State and Zip Code)				
For further information concerning this matter, please call:				
(Name of Person) Store Stor				

Enclosed is a check for the following amount:

\$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)

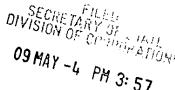
MAILING ADDRESS:

Registration Section Division of Corporations 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



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BIGMAN ENTE Name of the Limited Liability	RPRISES, LLC. Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Co	mpany were filed on 10 11 2004 and assigned
Florida document number <u>LOA0000746</u>	00.
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ed liability company here:
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRE	ESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office address	ered office address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	(Enter Florida street address)
	, , ,
	, Florida

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)

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>	Address	Type of Action
MGRM	MACINA, MICHAEL	981 NORTH 73 AVE. HOLLY WOOD FL 33024	Add Remove
MGRM	KRITIS, GEDRGE GEORGE KRITIS	173 WICKHAM RD. GARDEN CITY NY 11530	Add Remove
			Add Remove
			Add Remove
			Add Remove
,			Add Remove
D. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
			
			-
Dated	4/27/09	0 1	
_	Seoze	MX	
•	•	r authorized representative of a member	
-	GEORGE	r printed name of signee	

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Filing Fee: \$25.00