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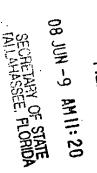
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M. Thomas JUN 1 0 2008

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: DONALD LEE TNUES MENTS, 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:
DONALOL LEE (Name of Person)
(Firm/Company)
270 TRopie DR. (Address)
LAUDERDALE BY THE SEA, FL. 33308 & City/State and Zip Code)
For further information concerning this matter, please call:
LAM DEADALE BY THE SEA, FL. 33308 (City/State and Zip Code) For further information concerning this matter, please call: DONALD LEE at (954) 494 - 0302 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) S55.00 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

DONALD LEE	INUES	IMENTS, 220	<u></u>	_
DONALD LEE (Name of the Limited Lia (A Flo	ibility Company orida Limited Lial	as it now appears on our pility Company)	r records.)	
The Articles of Organization for this Limited Liabil	lity Company w	,		d assigned
Florida document number <u>L04000 90</u>	<u>538</u> .			
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liabili	ty company here:		
MV LUCKY ENTERPR	ISE. LI	_C		
The new name must be distinguishable and end with the "L.L.C."	e words "Limited	Liability Company," the	designation "LLC" or	the abbreviation
Enter new principal offices address, if applicable	e:	Donald	Lee	<u></u>
(Principal office address MUST BE A STREET A	(DDRESS)		pic DR	
	,	LAUDERDALE	,	33300 F
Enter new mailing address, if applicable:		Donald Let	5	78 73
(Mailing address MAY BE A POST OFFICE BO	<u>X)</u>	270 TROPIC LAUDER DALE	ByThe SEA,	FI 39308
B. If amending the registered agent and/or registered agent and/or the new registered office		e address on our rec	ords, <u>enter the nar</u>	ne of the new
Name of New Registered Agent:	Donald		Polymer Control	
New Registered Office Address:	270 T	Ropie Da., (Enter Flo	orida street address)	
•		9 77 C	0.00	08
L	audbryble	By The SEA	_, Florida <u>もうろ</u> 	Code)
		(City)	(Zip	Coucy
New Registered Agent's Signature, if changing Reg	istered Agent:			

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

MGR = Manager

MGRM = Ma	anaging Member		
<u>Title</u>	Name	Address	Type of Action
<u>MGR</u> M	Drisy Sancher	270 TROPIC DR., LAUDERPALE BYTHE SEA PL. 33308	Add Remove
MGRM	Lise Bessette Lee	270 TROPYC DR, LANDERDALE BY THE SEA PL. 33308	Add Remove
MGRM	Donald LEE	270 TROPIC DR., LAUDERDALE BY THE SEA F1. 33308	Add Remove
			Add Remove
			Add L Remos
			-9 AMI: 20
D. If amendi	ing any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	- 3 20
			
			-
Dated	5/6/0-8		
	Signature of a member	or authorized representative of a member	
	Donald O. LE	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00