## L05000004264

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## **COVER LETTER**

	on Section of Corporations
SUBJECT: P1	1 ENTERPRISES, LLC (Name of Limited Liability Company)
	(
The enclosed Artic	eles of Amendment and fee(s) are submitted for filing.
Please return all co	prrespondence concerning this matter to the following:
	ORLANDO J. SILVA
	(Name of Person)
	MYOS FINANCIAL GROUP,INC
	(Firm/Company)
	2853 EXECUTIVE PARK DR SUITE 105
	(Address)
	WESTON, FL 33331
	(City/State and Zip Code)
For further informa	ation concerning this matter, please call:
ORLA	ANDO J. SILVA 31 ( 954- ) 349-3399
	(Name of Person) at ( 954- ) 349-3399 (Area Code & Daytime Telephone Number)
	for the following amount:
\$25.00 Filing Fee	\$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy 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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(Present Name)
(A Florida Limited Liability Company)

FIRST:	The Articles of Organization were filed on 01/13/06 and assign document number L05000004264	ed 		· · · · · ·						
SECOND:	This amendment is submitted to amend the following:									
	THE NAME AND ADDRESS OF MANAGING MEMBERS/MANAG	SERS A	<u>RE</u>							
	TITLE:MGRM, BEATRIZ DE PONCE, 1726 VICTORIA POINTE CIRCLE, WESTO	N, FL 33	327							
	TITLE: MGRM, GUILLERMO PONCE, 1726 VICTORIA POINTE CIRCLE, WESTON, FL 33327									
	TITLE: MGRM, LUIS A PONCE, 1726 VICTORIA POINTE CIRCLE, WESTO	N, FL 33	327	· ·						
				-						
		*		, -						
			<u>.</u>	•						
Dated JA	NUARY 26 , 2006									
		<b>⊉</b> &	06 F							
	Signature of a member or authorized representative of a member		8	AP						
	LUIS A PONCE	egin.	-6 PM	諺						
	Typed or printed name of signee		_==	11						

Filing Fee: \$25.00