

## Electronic Filing Cover Sheet

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(((H05000207431 3)))

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number: 072450003255

: (305)634-3694 Fax Number : (305)633-9696

### LIMITED LIABILITY AMENDMENT

#### MY FIRST 977 LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00



FLORIDA DEPARTMENT OF STATE Glanda E. Hood Secretary of State

August 31, 2005

MY FIRST 977 LLC 10556 NW 26 ST. SUITE D-101 DORAL, FL 33172

SUBJECT: MY FIRST 977 LLC

REF: L05000004883

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

In order to change your registered agent, the new agent must sign specific language accepting the designation of agent. Please add this language to your amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, pleased call (\$50) 245-6958.

Led Rivers Specialist

RECE 05 AUG 3 I IVIS:10N 0F 0 FAX Aud. #: E05000207431 Letter Number: 605A00054790 EMPIRE

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#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	MY FIRST 977 LLC
	(Fresent Name) (A Florida Limited Liability Company)
FIRST:	The Articles of Organization were filed on 01/18/05 and assigned document number L05000004883
SECOND:	The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:
ARTICLE	IV So On
CHANGE	REGISTERED AGENT TO: CABANAS & ASSOCIATES, P.A.
Or protection.	10520 NW 26TH STREET - SUITE C 201 DORAL, FL. 33172
ARTICLE	v Property of the second of th
DELETE (	CONSTANZA LINA SCATTOLINI AS MEMBER
ADD; CON	STANZA LINA SCATTOLINI AS MGRM
ELD/	A, LLC AS MGRM
ELEN	NI, LLC AS MEMBER
Dated AUG	SUST 30 2005
	Soul & Clemas
	Signature of a member or authorized representative of a member
	JOSEPH F. CABANAS, REGISTERED AGENT
	Typed or printed name of signee

Filing Fee: \$25.00

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# 405000207431

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

#### MY FIRST 977 LLC

(Name of Company)

Having been name as Registered Agent and to accept service of process for the above stated Limited Liability Company at the place designated in the Articles of Organization, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

CABANAS & ASSOCIATES, P.A.

Registered Agent

Signature of a Member or an Authorized Representative of a Member

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

JOSEPH F. CABANAS

Typed or Printed Name of Signee

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