L05000020463

(Requestor's Name)							
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(City/State/Zip/Phone #)							
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PICK-UP WAIT MAIL							
•							
(Business Entity Name)							
(Document Number)							
Certified Copies <u>17 4/55</u> Certificates of Status <u>7 / 6 / 5</u>							
Special Instructions to Filing Officer							
Special Instructions to Filing Officer:							
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10/28/09--01008--008 **25.00



S. HAWKES

OCT 29 2009

EXAMINER

; COVER LETTER

TO:	Registration Division of C		ns t				
SUBJE	CT:A	モリハ	LIC				
			Name of Li	mited L	iability Company		
The end	closed Articles	of Amend	ment and fee(s) are s	ubmitte	ed for filing.		
Please r	return all corres	pondence	concerning this mat	er to th	ne following:		
			Jenny	Wai	Name of Person		_
					Name of Person		
			Azur, L	ار	Firm/Company		
					Firm/Company		_
•			70 Box	613	011		
•					Address	·	_
			N Miami	FL	y/State and Zip Code		
				Cit	y/State and Zip Code		_
			E-mail address	(to be	used for future annual report notificat	ion)	
For furt	her information	concerni	ng this matter, please	e call:			
	Jenny	Wan	9		_at (786) 556 - 33	7 7	
	Namo	of Person			Area Code & Daytime T	cicphone Numb	er
	d is a check for	the follow	ving amount:				
⊠\$ 25.	00 Filing Fee		0.00 Filing Fee & Certificate of Status]\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certific	iling Fee, ate of Status & ed Copy anal 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**

Azur, LIC

(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)				
The Articles of Organization for this Limited Li	ability Company were filed on Feb. 28, 2005 and assigned				
Florida document number _ L 050000 20	463				
This amendment is submitted to amend the follo	the limited liability company here: h the words "Limited Liability Company," the designation "LLC" of the appreviation				
A. If amending name, enter the new name of	the limited liability company here:				
The new name must be distinguishable and end with L.L.C."	h the words "Limited Liability Company," the designation "LLC" of the appreviation				
Enter new principal offices address, if applica					
Principal office address MUST BE A STREE	TADDRESS)				
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE I B. If amending the registered agent and/oregistered agent and/or the new registered of	or registered office address on our records, enter the name of the new				
Name of New Registered Agent:	Jenny Wang 10350 w Bay Harbor Dr #2F Enter Florida street address				
New Registered Office Address:	10350 w Bay Harbor Dr #2F				
	Enter Florida street address				
	Bay Harbor 18 lands, Florida 33154 City Zip Code				
	City Zip Code				
New Registered Agent's Signature, if changing R	egistered Agent: I agent and agree to act in this capacity. I further agree to comply with				
norvoy accept the appointment as registered	agem and agree to uct in this capacity. I further agree to compty 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

Page 1 ok2

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
MGR	Sylvain Vonachen	10350 W Bay Harbor Dr + Bay Harbor Islands, FL 331	
MGR	Jenny Wang	10350 W Buy Harbor Dr = Buy Harbor Islands, FL 33	‡⊋F ⊠ Add 15Ч □ Remove
			Add Remove
•			Remove T
			Add Remove
			AddRemove
D. If am	ending any other information, enter char	nge(s) here: (Attach additional sheets, if necessal	ry.)
-			
Dated	october 19, a	009	
		er or authorized representative of a member Jenny Wang ed or printed name of signee	······································

Page 2 of 2

Filing Fee: \$25.00