L05000042793

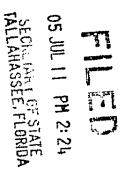
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



600054488696

05/31/05--01012--017 **25.00



Mappilos

LAW OFFICES

LOUIS J. CARBONE, P.A.

A PROFESSIONAL ASSOCIATION 11 SOUTH SWINTON AVENUE DELRAY BEACH, FL 33444

MEMBER OF NY, CT. FL & DC BARS (561) 272-0282 FAX (561) 272-6013 E-MAIL: LJCLEGAL@AOL.COM

NEW YORK OFFICE 111 NORTH CENTRAL PARK AVENUE HARTSDALE, NEW YORK 10530

> (914) 684-0201 FAX (914) 684-0356

May 8, 2005

TRANSMITTAL LETTER

TO:

Registration Section

Division of Corporations

SUBJECT_

The Piasente Group, L.L.C.

(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:

LOUIS J. CARBONE, ESQ (Name of Person)

LOUIS J. CARBONE, P.A (Firm/Company)

11 S. Swinton Avenue (Address)

Delray Beach, Florida 33444

(City/State and Zip Code)

For further information concerning this matter, please call:

<u>Louis J. Carbone</u>

<u>561 272-0282</u>

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount: \$25.00 Filing Fee



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 8, 2005

LOUIS J. CARBONE, ESQ. LOUIS J. CARBONE, P.A. 11 S. SWINTON AVENUE DELRAY BEACH, FL 33444

SUBJECT: THE PIASENTE GROUP, L.L.C.

Ref. Number: L05000042793

We have received your document for THE PIASENTE GROUP, L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

In order to change your registered agent information, your registered agent must sign the amendment. The specific language is found on the enclosed blank form; you may add an attachment to your amendment using this language.

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

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 605A0004026

See ATTACHED.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE PIASENTE GROUP, L.L.C.

(Present Name)
(A Florida Limited Liability Company)

FIRST:

The Articles of Organization were filed on May 2, 2005 and assigned

Document number L05000042793.

SECOND:

The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

- I. The Articles are further amended to correct the name of "MASSIMO PIASENTE" to "MASSIMO PIASENTE FOLIGNO" as Manager/Member having an address at 5405 White Oak Lane Tamarac, FL 33319 US.
- II. Article III is hereby amended to correct the name of the registered agent in in accordance with the attached Statement of Change of Registered Agent.

Dated: May 8, 2005

Signature of member or authorized representative of a member

Louis J. Carbone, Esq.

Type or printed name

Filing Fee \$25.00

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limit	ed liability compa	ny is: The Piasente	Group, LLC
2. The mailing address of	of the limited liabi	lity company is:	
5405 White Oal	k Lane, Tama	rac, FL 33319	
May 2, 2005		L050	000042793
Date of filing/registra	tion in Florida	4. Docum	nent number
5. The name of the regist Florida Department of	State:	e registered office address as	shown on the records of the
	Massimo	Piasente -	
Name 5405 White Oak Lane			
Address			
	Tamarac	Florida 33319	
		City, State and Zip	For St _
6. The name and address	of the new registe	ered agent and/or office:	ECAL TO LET ALL TO LET
	Massimo	Piasente-Foligno	353 = T
	5405 Wit	ptable) SEE. FLORI	
	Florida street address (P.O. Box NOT acceptable)		
	Tamarac	, FL 33319 FL	ALIE A
	(City, State and Zip	
If the limited liability conconfirmed that after the cand the business office of liability company, it is he the members of the limite the operating agreement.	change or changes f the registered ag reby confirmed the d liability compa	nized under the laws of the S are made, the Florida street and will be identical. Or, in that the change(s) was/were any or as otherwise provided in its company.	state of Florida, it is hereby address of the registered office the case of a Florida limited uthorized by an affirmative vote of in the articles of organization or

(Signature of a member or authorized representative of a member)

Masimo Piasente-Foligno

(Printed or typed name of signee)

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.

(Signature of Registered Agent) Massimo Piasente-Foligno

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18(10/99)