L05000042833

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EXAMINER

COVER LETTER

TO: Registration S					·	
SUBJECT:	SU	INELI LLC				
	Name of Lim	ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.				
Please return all corresp	ondence concerning this matter	r to the following:				
		MAX HAGEN				
		Name of Person				
	HAGEN & HAGEN Firm/Company					
		r unir company				
	3531 GRIFFIN ROAD Address					
	FORT	LAUDERDALE FL 33312 City/State and Zip Code				
	AN	GELM@MADELI.COM				
For further information of	E-mail address: (concerning this matter, please of	to be used for future annual report noticall:	fication)	Sales ALLA	29 E9 NOV	Brottong
M	AX HAGEN	at (954)	987 0515		1	\$100 March 2000
	of Person		ne Telephone Number		<u></u>	
Enclosed is a check for t	he following amount:			SALE.	D 57	i Sagar
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Fili Certifical d) Certified (addition	te of Stat Copy	us &	ed)
Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 33	on rations enter Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUNEL (Name of the Limited Liability Compa (A Florida Limited I	I LLC ny as it now appears on our records. Liability Company))		
The Articles of Organization for this Limited Liability Company Florida document number <u>L05000042833</u>	were filed onAPRIL 29, 20	05 and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company here:			
MADELI U	SA LLC			
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Company," the designation	on "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	7890 NW 34 STREET			
(Principal office address MUST BE A STREET ADDRESS)	MIAMI FL 33122	7A. 2		
Enter new mailing address, if applicable:	7890 NW 34 STREET	AND ST		
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI FL 33122			
		THE STATE OF		
		en ta:		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		er the name of the new		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street	address		
	, Florida			
	City	Zip Code		

New Registered Agent's Signature, if changing 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 Changing Registered Agent, Signature of New Registered Agent

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 Type of Action <u>Address</u> <u>Title</u> <u>Name</u> ANGEL MARTINEZ MGR 📝 Add **7890 NW 34 STREET** Remove MIAMIEL 33122 ERIC DORMOY MGR 7890 NW 34 STREET Remove MIAMLEL 33122 MGRD **ERIC DORMOY** 3615 nw 115 AVENUE DORAL EL 33178 Add Remove (38) 65 €n-1 Remove U D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member MAX HAGEN Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00