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(Document Number)				
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T. CLINE

APR 1 4 2008

**EXAMINER** 

## **COVER LETTER**

Registration Section
Division of Corporations

TO:

SUBJECT:	1201 SW 84	STREET, LLC	
· · · · · · · · · · · · · · · · · · ·	. (Name of Limi	ted Liability Company)	
	f Amendment and fee(s) are subspondence concerning this matter	_	
		aften	
	MAYA	(Name of Person)  MANALEMEN  (Firm/Company)	<u>T </u>
•	PO BOX	(Address)	
	MIAMI	BEACH FL (City/State and Zip Code)	33140
For further information	concerning this matter, please ca	11:	
MURRAY	ROSE of Person)	at (305) 53 × (Area Code & Daytim	5228 APR APR APR ASSET A
Enclosed is a check for \$25.00 Filing Fee	the following amount:  \$30.00 Filing Fee &  Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Return &
Regisi Divisi P.O. I	LING ADDRESS: tration Section on of Corporations Box 6327 assee, FL 32314	STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cerus Tallahassee, FL 323	n ations ater Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STRAFT. LLC

1201

company has been notified in writing of this change.

(Name of the Limited L (A F	Liability Company as it now appears on our records.  Plorida Limited Liability Company)
The Articles of Organization for this Limited Liab Florida document number <u>L05000</u> 045	bility Company were filed on 05-09-2005 and assigned
This amendment is submitted to amend the follow	ving:
A. If amending name, enter the new name of the solution $SOHO$	he limited liability company here: STUNOS LLC
"L.L.C."	the words "Limited Liability Company," the designation "LLC" or the abbreviation registered office address on our records, enter the name of the new ce address here:
ì	200 TAL
Name of New Registered Agent:	SECRET HA
New Registered Office Address:	(Enter Florida street address)
·	Florida TT TE
	(City) Sup Code)
New Registered Agent's Signature, if changing Reg	gistered Agent:
I hereby accept the appointment as registered	agent and agree to act in this capacity. I further agree to comply with

Page 1 of 2

(If Changing Registered Agent, Signature of New Registered Agent)

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

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 = M MGRM =	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			AddRemove
•			Add Remove
<del></del>			Add Remove
			ARE APR
	Pranopan	e(s) here: (Attach additional sheets, if necessar	2 2 4 4
Dated	ARRIL 8 A 20	08	
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	or authorized representative of a member  KIAN CREEN  or printed name of signee  Page 2 of 2	

1 1150 2 01 2

Filing Fee: \$25.00