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T. HAMPTON
JUN 1 3 2008

EXAMINER

COVER LETTER

TO: Registration Sect Division of Corpo				
SUBJECT: R.R. FIU	HC		a	
(Name of Limited Liability Company)				
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please return all correspond	dence concerning this matter	to the following:		
	FRANK C. SIMONE, ES	Q.	·	
		(Name of Person)		
SHERMAN LAW OFFICES, CHARTERED				
		(Firm/Company)	<u> </u>	
1000 CORPORATE DRIVE, SUITE 310				
(Address)				
FORT LAUDERDALE, FL 33334				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
FRANK C. SIMONE, ESQ. at (954) 489-9500 (EXT. 206)		206)		
(Name of	Person)	(Area Code & Daytime To	elephone Number)	
Enclosed is a check for the	following amount:			
☑ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional 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

OR JUN 12 PM 12: 1
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

and assigned

R.R. FIU., LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

Florida document number L05000087137

The Articles of Organization for this Limited Liability Company were filed on September 2, 2005

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FL 33132

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

152 N.E. 1ST AVE.

(Enter Florida street address)

MIAMI _____, Florida 33132

(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 Title <u>Name</u> **Address Type of Action ELIAS MOUSSA** Pres. 540 Brickell Key Drive, #1811 ■ Add Remove Miami. FL 33131 **ELIAS MOUSSA** MGR 152 N.E. 1ST AVE. MIAMI. FL: 33132 _ Remove 🗖 Add Remove ☐ Add Remove DbA 🔃 Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) June 5 signature of a member of authorized representative of a member

Typed or printed name of signee
Page 2 of 2

FRANK C. SIMONE, ESQ., Attorney for R.R. FIU., LLC

Filing Fee: \$25.00