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## COVER LETTER

(Name of Limited Liability Company)

TO: Registration Section Division of Corporations RIPPLEHOUTTES LLC

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Inirida Cervantes** (Name of Person) Wolfe & Goldstein, P.A. (Firm/Company) 100 S.E. Second Street, Suite 3300 (Address) Miami, Florida 33131 (City/State and Zip Code)

For further information concerning this matter, please call:

Inirida Cervantes (Name of Person) (Area Code & Daytime Telephone 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

RIPPLEHOUTTES LLC

|          | (Present Name) (A Florida Limited Liability Company)  |                               |           |   |
|----------|---|-------------------------------|-----------|---|
| FIRST:   | The Articles of Organization were filed on October 10, 2005 and assigned document number L05000100967 |                               |           |   |
| SECOND:  | This amendment is submitted to amend the following:   |                               |           |   |
|          | The name of the limited liability company shall be changed to   |                               |           |   |
|          | RIPPLEHOUETTES LLC  |                               |           |   |
|          |   |                               |           |   |
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|          |   |                               |           |   |
| Dated No | ovember 18 <u>2005</u> .  |                               |           |   |
|          |   |                               |           |   |
|          | Signature of the Nor authorized representative of a member  |                               |           |   |

Filing Fee: \$25.00

Richard C. Wolfe, Esq., as Authorized Representative of Member

Typed or printed name of signee