Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PAUL SALVER, P.A.

Account Number : 120020000087 : (954)389-1333 Phone Fax Number : (954)389-1397

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Email Address:



LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PROYECTO DORADO, LLC

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S. HAWKES

-MAY 1 3 2010

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Pro	oyecto Dorado, LLC			
(Na	me of the Limited Lin	bility Company as it now appeared Limited Liability Company)	rs on our records.)	<u> </u>	
	(A rio	nda Limited Liaotity Company)		世公 黄 小	
	_ 4. ~. 1 4~. 11		10/31/2005	La Caraciana Company	
The Articles of Organization f		ity Company were filed on	10/3/1/2003	and assigned	
Florida document number	L0500010626	3		Sing Tar	
				700	
This amendment is submitted	to amend the followin	ा द्रः		· 25 0	
A If amending name enter	the new name of the	limited liability company be	re:	35	
A. II dulenomy name, enter	the new Henre of the	The state of the s	-		
The new name must be distingu	shable and end with the	e words "Limited Liability Comp	any," the designation	"LLC" or the abbreviation	
"L.L.C."					
Enter new principal offices a	ddress, if applicable	;			
(Principal office address MU	CT RE A STREET A	DDRESS)			
11 The put office address 120	37 DE A GIREEL OF	<u> </u>			
			,		
Enter new mailing address, i	if applicable:				
•				<u> </u>	
(Mailing address MAY BE A	POST OFFICE BOX	<u> </u>			
		egistered office address on	our records, <u>enter</u>	the name of the new	
registered agent and/or the t	iew registered office	address here:			
Name of Name Product					
Name of New Regist	ered Agent:				
New Registered Offi	ce Address:				
TANK THE PROPERTY OF THE PARTY	<u> </u>	Enter Florida street address			
			, Florida _		
		Cîty		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 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:

<u>Title</u>	Name	Address	Type of Action
MGRM	Zonia M. Campos	920 SW 153 Road Court Miami El 33194	Add Remove
			Add Fr
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter	change(s) here: (Astach additional sheets, if necessary	.) —
	5/12	2010	
Dated	<u> </u>	2010 Spanlle	
	Signature of a r	nember or authorized representative of a member	
		Salvador Spinello Typed or printed name of signee	

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Filing Fee: \$25.00