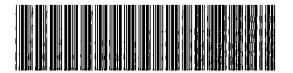
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2011 NOV - 1 RM 1: 1.1
SECRETARY OF STATE

FILED

C. LEWIS

NOV 2 2011

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporation	on rations			
~ SUBJE	•	Pla	za 903 LLC		
30131			ited Liability Company		
The en	closed Articles of Arr	nendment and fee(s) are sul	bmitted for filing.		
Please	return all corresponde	ence concerning this matter	r to the following:		
		G	uerassim Guerassimov		
	·		Name of Person		
	-		Firm/Company		
		1835	E. Hallandale Blvd #463		
	Address				
	_	H	Hallandale, FL 33009		
			City/State and Zip Code		
•	_	E-mail address: (gary.llc@gmail.com to be used for future annual report noti	fication)	
For furt	her information conc	erning this matter, please of			
		Guerassimov	at (305)	790-4171	
	Name of Pe	rson	Area Code & Daytin	te Telephone Number	
Enclose	ed is a check for the fo	ollowing amount:			
\$25	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 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

FILED

2011 NOV - 1 RM 1:41

	Plaza 903 LLC	SEC	RETARY OF STATE
(<u>Name of the Limited Liah</u> (A Flor	Plaza 903 LLC bility Company as it now appear ida Limited Liability Company)	s on our records.	MASSEE, FLORIDA
The Articles of Organization for this Limited Liabili			and assigned
Florida document numberL0500010853	<u>8</u> .		
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company her	<u>e</u> :	
Plaza	903 Development LLC		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Compa	ny," the designation "l	LC" or the abbreviation
Enter new principal offices address, if applicable	····		
(Principal office address MUST BE A STREET AI	DDRESS)	. ,	

Enter new mailing address, if applicable:		<u> </u>	
Mailing address MAY BE A POST OFFICE BOX			
B. If amending the registered agent and/or re	•	ur records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:	·		
	Ent	er Florida street add	ress
		, Florida	<u>.</u>
	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** Name **Type of Action** <u>Address</u> ☐ Add Remove ☐ Add ☐ Remove ☐ Add ☐ Remove ∏Add Remove Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2011. Signature of a member or authorized representative of a member

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00