## L05000112670

· (Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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B. KOHR

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**EXAMINER** 

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
Division of Corporations  SUBJECT: A + E Two Associations  (Name of Corporations)	t and fee are submitted for filing.
DOCUMENT NUMBER: 405000 113	16 70
The enclosed Statement of Change of Registered Office/Ager	it and fee are submitted for filing.
Please return all correspondence concerning this matter to the	following:
Rowald 1. De	War '
ROND IL 1. DAVI SUITE 334 (Firm/Company	s Р. А.
16375 N.E 18 Th	Are
(Address)	
North Muani C	Deach Fla 33162 Code)
	Code)
For further information concerning this matter, please call:	
Rowald L. Auis at (	305 940-2352
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of	of State.
Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO

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

(A Florida Limited Liability Company) Florida document number 1050000 112670 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new rame must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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) 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: RONALD L. DAVIS

Suite 334 16375 N.E. 18 Ave

(Enter Florida street address)

Porth Miani Beach Florida 33162

(City) (Zip Code) Name of New Registered Agent: New Registered Office Address:

## 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.

MGR = Manager

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:

Title	Name	Address 334	Type of Action
MGRM	RONALL 1. DAVIS	16375 N.E. 18 MAVE North Humi Beach Fla 33162	Add Remove
MGRM	CAROL AND DAVIS	South 334 16315 N.E. 182 Are North Miam Good F/A 331	Add Remove
16 RM	EliAHU Abukasis	Suite 17038 West Dyro 17038 North Mismi	
<del></del>			Add Remove
			Add Remove
		•	Add Remove
D. If amendi	ing any other information, enter chang	ge(s) here: (Attach additional sheets, if necessar	y.)
			<u> </u>
<del></del>			
Dated Jul	21, 2008 ai	. acci)	
•	ERIAHU A:	or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00