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EXAMINER



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06/01/10--01064--015 **30.00

SECRETARY OF STATE

MIS, L.L.C.

May 27th, 2010

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee FL 32314

REF: MIS, L.L.C.

Document # L05000113645

Enclosed please find an Amendment Request to the Articles of Organization of MIS, L.L.C. Please return the certified copy to:

Marcos Lapciuc 15800 NW 48th Avenue Miami Gardens, FL, 33014

Phone Number: (305) 592 4500

Best Regards,

Marcos Lapciuc

COVER LETTER

TO:	Registration S Division of Co					
SUBJ	rct.	M	IS. L.L.C.			
SOBJ	EC1:		ited Liability Company			
The en	nclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.			
Please	return all corresp	ondence concerning this matter	to the following:			
	MARCOS LAPCIUC					
Name of Person						
PRECISION TRADING CORP.						
Firm/Company						
15800 NW 48TH AVENUE						
Address						
		AALAA	MI CADDENS EL 22014			
		IVIIAI	MI GARDENS, FL, 33014 City/State and Zip Code			
		MARCOS	@PRECISIONTRADING.COM			
		E-mail address: (to be used for future annual report notification)			
For fu	rther information	concerning this matter, please of	call:			
	MAR	COS LAPCIUC	at (305) 592 4500			
	Name	of Person	Area Code & Daytime Telephone Number			
Enclos	sed is a check for	the following amount:				
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	sed)		
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		tration Section on of Corporations 30x 6327	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

MIS, L.I	∟.C.		
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears	on our records.)	
(A Florda Limited Lia	onity Company)		
The Articles of Organization for this Limited Liability Company w	ere filed on	11/28/2005	and assigned
Florida document numberL05000113645			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabili	ity company here:		
,			
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company	," the designation "LL	C" or the abbreviation
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	ce address on ou	r records, enter th	e name of the new
registered agent and/or the new registered office address here:			
Name of New Registered Agent:		·	i o
Maine of New Registered Agent.	······································		
New Registered Office Address:		<u>`</u>	
	Enter	·Florida street addre	SSS 1
		99 1911 - 1921 - 171	
· · · · · · · · · · · · · · · · · · ·	City	, Florida :	Zip Code
	C.I.y	t:"	-'(/) (a) 1
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree			
the provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent as pr			
being filed to merely reflect a change in the registered office a			

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:

MGR = Manager

MGRM = Managing Member **Title** Name Address **Type of Action** MBR ISAAC LAPCIUC 1820 NE 163RD STREET SUITE 100 NORTH MIAMI BEACH FL 33162 **✓** Remove **SIMON BEDA** MBR 1820 NE 163RD STREET SUITE 100 ✓ Add NORTH MIAMI BEACH FL 33162 Remove □ Remove Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00