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(City/State/Zip/Phone #)

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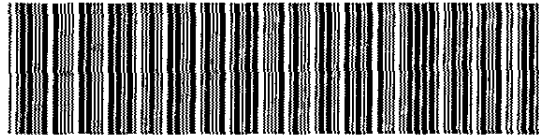
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ADRIALEX, LLC  
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

ALEJANDRO ANTON

(Name of Person)

ADRIALEX, LLC

(Firm/Company)

322 COSTA BRAVA CT.

(Address)

CORAL GABLES, FL 33143

(City/State and Zip Code)

For further information concerning this matter, please call:

ALEJANDRO ANTON

(Name of Person)

at ( 786 ) 306-5666

(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

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TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

ADRIALEX, LLC.

(Present Name)  
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 1/31/06 and assigned  
document number LOG000010604

SECOND: This amendment is submitted to amend the following:

To Add BEATRIZ ANTON AS A  
manager/member.

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07 OCT - 1 PM 1:24  
SECTION OF STATE  
TALLAHASSEE FLORIDA

Dated September 26, 2007

Alejandro Anton

Signature of a member or authorized representative of a member

ALEJANDRO ANTON

Typed or printed name of signer