LD6000051908

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G. MCLEOD

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EXAMINER



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03/31/08--01015--003 **25.00

08 MAR 31 PH 4: 07

SECRETARY OF STATE DIVISION OF CORPORATION

COVER LETTER

TO:

Registration Section

Division of Corporations				
SURJECT: VIC	ctoria Engineering and Inves	tment LLC		
		nited Liability Company)		
The enclosed Art	icles of Amendment and fee(s) are sul	bmitted for filing.		
Please return all	correspondence concerning this matter	r to the following:		
	Timur Isparyan	(Name of Person)		
	Victoria Engineering	and Investment LLC	· · · <u> </u>	
	4459 Forest Haven	(Firm/Company)		
	4439 Fülest Haveli	(Address)		
	Jacksonville, FL 322	257 (City/State and Zip Code)		
For further inform	nation concerning this matter, please of	eall:		
Timur Ispary	an (Name of Person)	at (904) 891-6534 (Area Code & Daytime	Telephone Number)	
	(,	,	
Enclosed is a che	ck 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	STREET/COURIER Registration Section	ADDRESS:	
	Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division of Corporati Clifton Building 2661 Executive Cente		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED SECRETARY OF STATE DIVISION OF CORPORATION

08 MAR 31 PM 4: 07

(Name of the Limited Liabili (A Florid	ity Company as it now appears of a Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability	Company were filed on 06/05	i/2006 and assigned
lorida document number <u>L06000056908</u>	·	
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the li</u>	mited liability company here:	
	Å,	
The new name must be distinguishable and end with the w'L.L.C."	ords "Limited Liability Company	"the designation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office ad		records, enter the name of the nev
egisteren agent andror me new registeren ornee au	<u></u>	
	· , · · ·	
Name of New Registered Agent:	:	1
New Registered Office Address:	المنوا	
TOW REGISCOLOG OTHER PROBLEMS.	(Enter Florida street address)	
		·
- All Andrews	(C:L.)	, Florida(Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register	red Agent:	
hereby accept the appointment as registered agen he provisions of all statutes relative to the proper of accept the obligations of my position as registered being filed to merely reflect a change in the registe company has been notified in writing of this change	and complete performance of agent as provided for in Chap red office address, I hereby co	my duties, and I am familiar with and eter 608, F.S. Or, if this document is
	(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

Title	Name	Address	Type of Action
MGR	Samuel Schneider	8122 Santillo Dr Jacksonville, FL 32217	Add Remove
			Add Remove
***************************************			Add Remove
			Add Remove
			Add Remove
			Add
D. If amendin	g any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary	.)
<u></u>			
Dated March	27th 200	8	
	ST	of or addingrized representative of a member	
Т	imur Isparyan	d or printed name of signee	

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Filing Fee: \$25.00