## L04000069210

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## **COVER LETTER**

TO:

то:	R'egistration Secti Division of Corpo			,	
SUBJI	ECT:	FAO HO	OLDINGS, LLC		
5624			ted Liability Company		
The en	closed Articles of Ar	nendment and fee(s) are sub	omitted for filing.		
Please	return all correspond	ence concerning this matter	to the following:		
			Renier Cruz, Esq.		
			Renier Cruz, P.A.		
		300.5	Sevilla Avenue, Suite 3	301	
			Address		
		Cora	al Gables, Florida, 331 City/State and Zip Code	34	7313
		E-mail address: (i	rc@cruzpa.com to be used for future annual repo	rt notification)	· · · · · · · · · · · · · · · · · · ·
For fur	ther information con	cerning this matter, please c	all:		SECRETARY OF STATE
	Renie	r Cruz, Esq.	at ( 305 ) Area Code & I	443-2772 Daytime Telephone Number	AGREGA STATS THE
Enclos	ed is a check for the	following amount:			
<b>√</b> \$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certified	te of Status &
	Registrati Division ( P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, FL 32314	Registration Division of C Clifton Build	Corporations	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FAO HOLD  (Name of the Limited Liability Compa (A Florida Limited I	INGS, LLC		-	
(A Florida Limited I	Liability Company)			
The Articles of Organization for this Limited Liability Company	were filed on07/10/2006	and	assign	ed
Florida document numberL06000069210				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	pility company here:			
The new name must be distinguishable and end with the words "Limit".L.L.C."	ited Liability Company," the designation "l	LLC" or t	he abbi	reviation
Enter new principal offices address, if applicable:	300 Sevilla Avenue Suite 301	)		
(Principal office address MUST BE A STREET ADDRESS)	Coral Gables, Florida, 33134		2	<del></del>
			3	<u>-</u> -,
Enter new mailing address, if applicable:	300 Sevilla Avenue, Suite 301	TSSE YSSE	0	gya kinas B
(Mailing address MAY BE A POST OFFICE BOX)	Coral Gables, Florida, 33134	[9 G)	PK	11
		<u> </u>	1:1-1-1	** ———
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		he nam		he new
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street ada	lress		
	, Florida	Zip C		
	City	Zip C	oue	

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Renier Cruz	300 Sevilla Avenue, Suite 301 Coral Gables, Florida 33134	✓ Add Remove
			Add Remove
			Add Remove
			Add Remove
			□ □ □ Remove □ □
			□ □ □ A-dd □ □ □ Remove
D. If amen	ding any other inform	mation, enter change(s) here: (Attach additional sheets, if neces	ssary.)
Dated	May 6	Jelin (j.)	
		Signature of a member of authorized representative of a member YOLANDA ORIHUELA-CRUZ, MGR Typed or printed name of signee	

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Filing Fee: \$25.00