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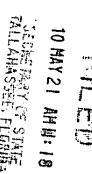
(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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05/21/18--01005--002 **25.00



D. BRUCE

MAY 25 2010

EXAMINER

COVER LETTER

TO: Re	egistration Secivision of Corp	ction porations		•	,		-	
SUBJECT:		Ou	ter V, LLC	i				
			ited Liability Company		• • •	•		
The enclose	ed Articles of	Amendment and fee(s) are sul	omitted for filing.					
Please retur	rn all correspoi	ndence concerning this matter	to the following:					
			Richard L. Barbara	•				
			Name of Person	_		•		
		Α	lvarez & Barbara, LLP	,				
			Firm/Company					
		2701 S	South Bayshore Drive, #30	5				
		2.010	Address					
	-		Miami, FL 33133	i .		155		
			City/State and Zip Code				10 MAY	***************************************
		E-mail address: (to be used for future annual report noti	fication)		3.7	2	****
For further	information co	oncerning this matter, please o	eall:			の発	-	
	Cin	dy Barbara	at (305.)	263-7700		FL CR	AM TEN	E. T.
	Name of	Person		ne Telephone Number		ತ್ರ ಗ	6	
				;				
Enclosed is	a check for the	e following amount:		1				
\$25.00 F	Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed	d) Certified	e of Status &			

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Outer \			
(Name of the Limited Liability Comps (A Florida Limited	ny as it now appea Liability Company)	rs on our records	
The Articles of Organization for this Limited Liability Company	y were filed on	08/03/200	and assigned
Florida document numberL0600077102		•	
	•	ı	
This amendment is submitted to amend the following:	•	ı	
A. If amending name, enter the new name of the limited liab	oility company he	<u>re</u> :	
•			
The new name must be distinguishable and end with the words "Lim'L.L.C."	ited Liability Comp	any," the designati	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:	10478 SW 7	5 Lane	
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33	173	
1		!	6
Enter new mailing address, if applicable:	10478 SW 75	5 Lane	
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33	3173	SE N =
•			The second
			S
B. If amending the registered agent and/or registered of		our records, <u>en</u>	
registered agent and/or the new registered office address her	<u>:e</u> :		69
Name of New Registered Agent:			
New Registered Office Address:	- J. 34	<u>.</u> ‡	٠.
•	En	nter Florida street	t address
		, Florid	a
 	City		Zip Code

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 ame or Mar	nding the Mana aging Member l	gers or Managing Memb being added or removed	ers on our rec from our reco	ords, <u>enter the t</u> rds:	itle, name, and	Laddress of each Manager
MGR =	= Manager I = Managing M			_	f .	
<u>Title</u>	<u>Name</u>		Addres	I <u>s</u> ;		Type of Action
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	<u> </u>					Add Remove
D. If aı	nending any oth	er information, enter ch	ange(s) here: (Attach additional	sheets, if neces	sary.)
	Amend Addr	ess for MGR Daniel A	\. Vega to:		!	
•	10478 SW 7	5 Lane, Miami, FL 33	173		į	TO MAY 21 MM W.
				1.2	1	
		<u> </u>		<u> </u>	<u> </u>	THE PLANT
			-//			The state of the s
			5-		í	
Dated _	Ma	y 19	2010//			3
-					•	
		Signature of a men	ber or authorize	d representative of	a member	
			paniel V			
		Ту	ped or printed na	me of signee	., ;	
			Page 2 o	of 2	•	

Filing Fee: \$25.00