LD400081935

(Re	equestor's Name)	
(Ad	dress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	• #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



300081567443

11/09/06--01016--008 **25.00

SECRETARY OF STATE STATE OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Dorado II, LLC		
(Name of I	Limited Liability Company)	
The enclosed Articles of Amendment and fee(s) are s		
Please return all correspondence concerning this matt	er to the following:	
Joseph A. Porrello	<u> </u>	
	(Name of Person)	
Joseph A. Porrello, P	P.A. 9 97	
- 0 - 4-0040	(Name of Person) O.A. (Firm/Company) (Address)	
P.O. Box 450249	(Address)	
Miami, Florida 332	45	
(Cit	y/State and Zip Code)	
For further information concerning this matter, please	e call:	
Joseph A. Porrello	at (305) 374-0092	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status	S\$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 ADDRESS: Registration Section	
Division of Corporations	Division of Corporations	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Do	orado II, LLC
	(Present Name) (A Florida Limited Liability Company)
	·
FIRST:	The Articles of Organization were filed on August 18, 2006 and assigned document number L06000081935
SECOND:	This amendment is submitted to amend the following:
	I. Sherief Abu-Moustafa is removed as a member.
	II. The principal address and mailing address is 1515 Southeast 10th Street
	Deerfield Beach, Florida 33441.
Dated	////ob.
	Signature of a member or authorized representative of a member
	Diane Orr, Managing Member Typed or printed name of signee

Filing Fee: \$25.00