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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	<u>a #)</u>
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PICK-UP	■ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	
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SECRETARY OF STATE DIVISION OF CORPORATION

COVER LETTER

Division of Corporations
SUBJECT: PAY LESS SPONE LLC (Name of Limited Liability Company)
(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:
Burau SEvic (Name of Person)
(Name of Person)
DAY LESS STONE LLC
PAY LESS STOUR LLC (Firm/Company)
10 wast San Marino Drive (Address) Milami FC 33139 (City/State and Zip Code)
Milami FC 33139 (City/State and Zip Code)
For further information concerning this matter, please call:
BURAU SEVIC at (786) 325 1977 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

7*

TO:

Registration Section

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

	PAY LESS STANK LLC	_
	(Present Name) (A Florida Limited Liability Company)	
FIRST:	The Articles of Organization were filed on $\frac{12}{28}/2006$ and assigned document number	
SECOND:	: This amendment is submitted to amend the following:	
	Since my father (NATIM SEVIG) and My brother are not point to be here, I would like to remove their names on	-
	my brother are not point to be here,	-
	I would like to remove their names on	-
	the second. As a manager and treasure	
	I would like to suge negself at those	
	positions. The names of all such manage	ds)
	who is fare to serve as manager (s) isfare 5 hould be Burak Sevic:	ڍ
	5 hould be Burak Sevic:	-
	Sincerely.	-
	Sincerely. Buran Sevic	
	}	
Dated/	12/28/2006.	
	_	
	Run	
	Signature of a member or authorized representative of a member	
	Burale Sevie	
	Typed or printed name of signee	0