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(Requ	uestor's Name)	
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## COVED LETTED

COVER LETTER					
TQ: Registration Section Division of Corporations					
SUBJECT: (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:					
LOUQO MORQUINO (Name of Person)					
· QUATRO TOJESTMENTS, L.C.					
291 5W 27 ave					
Miami, Fl 33135 (City/State and Zip Code)					
For further information concerning this matter, please call:					
(Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee Certificate of Status Certified Copy \$560.00 Filing Fee, Certificate of Status \$55.00 Filing Fee Certified Copy					

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Present Name) (A Florida Limited Liability Company)

FIRST:	The Articles of Organization were filed on and assigned document number and assigned	i	
SECOND:	This amendment is submitted to amend the following:  (MONO)		embers)
	2) Ann E. Marguina, 1981; 32 CT, Miami, F1 331-	SW 45, UC	5
Dated	Signature of a member or authorized representative of a member	CHASSEE FU	MA 10 SIN LINE
	Typed or printed name of signee	<u> </u>	?:

Filing Fee: \$25.00