## LD 1000021495

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SEGRETAKY OF STATE TAULAHASSEE, FLORIDA

## **COVER LETTER**

TO: Registration S Division of Co				
SUBJECT: _	EY	E BIZ LLC		
		ited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	oondence concerning this matte	r to the following:		
	JORGE DONA			
		Name of Person		
		EYE BIZ LLC		
		Firm/Company		
7855 NW 29 ST SUITE 158				
		Address		
		MIAMI FL 33122		
		City/State and Zip Code		
	E-mail address: (	to be used for future annual report notifica	tion)	
For further information	concerning this matter, please of	eali:		
JC	ORGE DONA	at ( 954 ) 6	18-9482	
Name of Person		Area Code & Daytime Telephone Number		
Enclosed is a check for t	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$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		STREET/COURT	AADDDEGG	

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

ed Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_ and assigned Florida document number \_\_\_W1-2495 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: 7855 NW 29 ST SUITE 158 (Principal office address MUST BE A STREET ADDRESS) MIAMI FL 33122 7855 NW 29 ST SUITE 158 Enter new mailing address, if applicable: MIAMI FL 33122 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: JORGE DONA Name of New Registered Agent: 7855 NW 29 ST SUITE 158 New Registered Office Address: Enter Florida street address MIAMI Florida City 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 (IB, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, 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> <u>Address</u> **Type of Action** MGR JORGE DONA 7855 NW 29 ST SUITE 158 ✓ Add Remove MIAMI FL 33122 MGM GERARDO DONA 7855 NW 29 ST SUITE 158 ∏ Add Remove MIAMI FL 33122 MGRM GERARDO DONA 7855 NW 29 ST SUITE 158 ☐ Add MIAMI FL 33122 Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **MAY 31** 2011 Dated \_\_\_\_ Signature of a member or authorized representative of a member JORGE DONA Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00