L07000023439

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Nam	ne)
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(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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GIVISION OF CORPORATIONS
ON JUL 16 PM 4: 08

COVER LETTER

TO: Registration So Division of Co			
SUBJECT: SILM	AFE, LLC		
SUBJECT.	(Name of Lim	nited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Lourdes Corvo	Esq.	
		(Name of Person)	
	Lourdes Corvo	P.A.	
		(Firm/Company)	
	15450 New Bar	n Rd Suite 302	07
		(Address)	JUL ONE T
	Miami Lakes, Fl	L 33014	16 CON
		City/State and Zip Code)	PH 7897
For further information	concerning this matter, please o	call:	O7 JUL 16 PH 4: 08
Lourdes Cor	vo Esa	at (305) 827-008	4
	of Person)	(Area Code & Daytim	
Enclosed is a check for 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)
Regisi Divisi	LING ADDRESS: tration Section on of Corporations	STREET/COURII Registration Section Division of Corpora	n
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Cer	nter Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	SILMAFE, LLC	
	(Present Name) (A Florida Limited Liability Company)	
FIRST:	The Articles of Organization were filed on document number <u>L07000023439</u> and assigned	
SECOND:	This amendment is submitted to amend the following:	
	Correction of Name of Manager	
	Current Name of Manager: Silvia E. Fernandez	
	Correct Name of Manager: Silvia M. Fernandez	🔾
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		OF JUL 16 PH 4: 08
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		PH 4: 08
		08
		
		
Dated Ju	ly 11, 2007	
	Signature of a member or authorized representative of a member	
,	Silvia M. Fernandez Typed or printed name of signee	

Filing Fee: \$25.00