

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

ACCOUNT Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 : (305)634-3694

Fax Number : (305)633-9696

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NAS UNLIMITED DOORS, LLC

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11/2/2009

09:91 6002/20/11



ARTICLES OF AMENDMENT #09000233044 TO ARTICLES OF ORGANIZATION OF

	MITED DOORS, LL			
(Name of the Limited Liability (A Florida	Limited Liability Company)	on our recorns.		
The Articles of Organization for this Limited Liability Of Florida document number	Company were filed on	03/28/2007	and assign	ed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	ited liability company here	:		
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Compan	y," the designation "LLC"	or the abbi	eviation
Enter new principal offices address, if applicable:				<u>=</u>
(Principal office address MUST BE A STREET ADDI	RESS)		8	SE
			<u> </u>	
Enter new mailing address, if applicable:			V-2	TARY OF CO
(Mailing address MAY BE A POST OFFICE BOX)	*****		3	R
			•	RAT
,			മാം	15E
B. If amending the registered agent and/or registered agent and/or the new registered office add	tered office address on ou ress here:	or records, <u>enter the r</u>	name of t	he <mark>oc</mark> ew
Name of New Registered Agent:				
•				
New Registered Office Address:	Enter Florida street address			
		, Florida		
	Citv	Z	io Code	

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 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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If argending 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 = Mana MGRM = Ma	iger naging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	READ, THIERRY	2450 Palm Avenue HIALEAH EL 33010	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
**************************************			Add Remove
D. If amendin	g any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary.)	NAIG NAIG
	•		SECRETARY OF:SI VISION OF CORPOR 09 NOV -2 AM :51
Dated	November 2nd ,	2009	STATE RATIONS 9: 16
_	_	Sergio MATTIG sed or printed name of signee	

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