## L070W045211

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(Ac	ldress)	
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B. KOHA

MAY 1: 2012

EXAMINER



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05/08/12--01025--010 \*\*25.00

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: TALUCA ART LLC  Name of Limited Liability Company
losed Articles of Amendment and fee(s) are submitted for filing.  eturn all correspondence concerning this matter to the following:    DENIS FISHMAN     Name of Person
Please return all correspondence concerning this matter to the following:
<b>A</b>
LAV OFFICES OF DENIS FISHMAN, LLC Firm/Company
2999 NE 1918 St 4603 Address
AVENTURA CC 33/80  City/State and Zip Code  Fishmay law a bell south net  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (335) 931 - 9355  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ 55.00 Filing Fee \& \text{Certified Copy} & \text{(additional copy is enclosed)} \end{align*}\$

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

_ TALUCA ART, LLC	
(Name of the Limited 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	07 and assigned
Florida document number <u>L07000045211</u> .	
This amendment is submitted to amend the following:	# 9.
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 "L.L.C."	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
·	<del></del>
B. If amending the registered agent and/or registered office address on our records, entregistered agent and/or the new registered office address here:	ter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street	t address
, Florida	
City  New Registered Agent's Signature if changing Degistered Agent:	Zip 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

MGR = Manager ' MGRM = Managing Member				
<u>`itle</u>	Name	Address	Type of Action	
1GRM	DEN'S FISHMAN	2999 N.E. 1918+ St. #603 AVENTURA FL 33180		
16KM	ALEXANDER FISHMAN	2999 N.E. 19/51 St, #603 AVENTURA FL 33180	Add Remove	
			Add Remove	
			Add Remove	
<u> </u>			Add Remove	
			Add Remove	
. If amend	ling any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	_	
			_	
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Page 2 of 2

Filing Fee: \$25.00