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EXAMINER

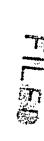
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COVER LETTER

TO:	Registration Section Division of Corporations		
'i SUBJEC	I Law P.L.		
SOBJEC	Name of Limited Liability Company		
The encl	osed Articles of Amendment and fee(s) are submitted for filing.		
Please re	turn all correspondence concerning this matter to the following:		
	Naji Israoui		
	Name of Person		
	I Law, P.L. Firm/Company		
	Firm/Company		
	7209 Curry Food Rd., Suite C	2011 DEC 12 1 JEGRETARY O ALLIAHASSEE	
	Address	Z.S.	
	Orlando FL 32822		En
	City/State and Zip Code		
	E-mail address: (to be used for future annual report notification)		
For furth	er information concerning this matter, please call:		
	Name of Person Area Code & Daytime Telephone Number		
	Name of Person Area Code & Daytime Telephone Number	г	
Enclosed	is a check for the following amount:		
\$25.0	(additional copy is enclosed) Certified	ite of Status &	ed)
	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

I Law	, P.L.			
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appea Limited Liability Company)	ars on our records.)		
The Articles of Organization for this Limited Liability (Florida document numberLO7 0000 8 4917	Company were filed on	8117107	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the lim</u>	nited liability company he	<u>ere</u> :		
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Comp	pany," the designation "Ll	.C" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADD)	RESS)		22	
		AHASS	F	
Enter new mailing address, if applicable:			<u>v:</u>	
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		our records, enter th	e name of the new	
Name of New Registered Agent:				
New Registered Office Address:	Eı	nter Florida street addr	ess	
	City	, Florida	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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

	· Manager I =-Managing Member	·	
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			A HOLD Remove
	_		And And Andrews
D. If an	nending any other information, enter change Please change the Little for		
	Please change the title for to MBR (Manager) and Israoui from MBR to r	Change the fitte for Ch nember.	rubne
Dated	Decamber 8, 20	11	
	_	or authorized representative of a member	
	Typed o	r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00