(D) (DO) 88220)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EB 20 AH 10: 38

T. CLINE

FEB 2 1 2008

EXAMINER

COVER LETTER

TO: Registration Division of C			97.		
SUBJECT: Elite E	Beverages S.E., LLC				
	(Name of Lin	nited Liability Company)	- 		
The enclosed Articles of	of Amendment and fee(s) are sul	bmitted for filing.			
Please return all corres	pondence concerning this matter	r to the following:			
	Raymond J. Akoury				
		(Name of Person)			
	Elite Beverages S.E				
		(Firm/Company)			
	1540 NW 3rd St. #1	44	TAL	290	
		(Address)	7 C	2000 FEB	1 *1 = 2
	Deerfield Beach, Flo	orida 33442	ASS.	8 20	et. aas abu ar para i sa N
		(City/State and Zip Code)			A week print
For further information	concerning this matter, please of	call:	HASSEE, FLORIDA	AH 10: 38	econ en e
Raymond J. Akou		at (954) 263-1719			
(Nam	e of Person)	(Area Code & Daytime T	'elephone Number)		
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 Sta Certified Copy (additional copy		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

		our records.)		
The Articles of Organization for this Limited L	iability Company were filed on Augus	t 28, 2007	and assigne	d
Florida document number <u>L0700088220</u>	·			
This amendment is submitted to amend the follo	owing:			
			201 751	
A. If amending name, enter the new name o	f the limited liability company here:		CRET B	1000
N//			20 F	COST.
The new name must be distinguishable and end wit 'L.L.C."	th the words "Limited Liability Company,"	the designation	그만의 🖭 🧐	viatio
B. If amending the registered agent and/oregistered agent and/or the new registered of	or registered office address on our	records, <u>ente</u> i	2台 (3	e ne
The state of the s				
again una or the new registered or	need address here.			
Name of New Registered Agent:	N/A			
Name of New Registered Agent:				
	N/A 1540 NW 3rd ST. #144	Florida street a	address)	
Name of New Registered Agent:	N/A 1540 NW 3rd ST. #144 (Enter		•	
Name of New Registered Agent:	N/A 1540 NW 3rd ST. #144		address) 33442 (Zip Code)	
Name of New Registered Agent: New Registered Office Address:	N/A 1540 NW 3rd ST. #144 (Enter Deerfield, Beach (City)		•	
Name of New Registered Agent: New Registered Office Address:	N/A 1540 NW 3rd ST. #144 (Enter Deerfield, Beach (City)		•	
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing I hereby accept the appointment as registere the provisions of all statutes relative to the p	N/A 1540 NW 3rd ST. #144 (Enter Deerfield, Beach (City) Registered Agent: d agent and agree to act in this capace roper and complete performance of m	, Florida _ eity. I further a ny duties, and	33442 (Zip Code) agree to comply well am familiar with	, 1 (179)
Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing I hereby accept the appointment as registere the provisions of all statutes relative to the procept the obligations of my position as registered.	N/A 1540 NW 3rd ST. #144 (Enter Deerfield, Beach (City) Registered Agent: d agent and agree to act in this capace roper and complete performance of m	, Florida _ eity. I further a ny duties, and . er 608. F.S. O	33442 (Zip Code) agree to comply well ann familiar with this document	, 1 (179)

If amerding 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 **Type of Action Title** Address <u>Name</u> <u>MGR</u> Samuel Ginoni 405 N. Ocean Blvd. #911 **✓** Add Pompano Bch. Florida 33062 Remove Christopher McCoart MGR 130 Island In. West Haven, Ct. 06516 Add Remove Add **⊆** Remove Remove Add Remove

Dated _	Febuary 19 2008
	Land See
	Signature of a member or authorized representative of a member
	Raymond J. Akoury

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00