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SECRETARY OF STATE
ALLAHASSEF, FLORIN

D. BRUCE

FEB **9** 2009

**EXAMINER** 

## **COVER LETTER**

TO: "Registration Section Division of Corporations	
SUBJECT: IRON ENTERPRISES LLC Aba Modern Displa (Name of Limited Liability Company)	Zy
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Timur Colak (Name of Person)	
IRON ENTERPRISES, LLC (Firm/Company)	
1541 Brickell Ave #504  (Address)  From	
Miami, FL 33129  (City/State and Zip Code)  [City/State and Zip Code)	7
For further information concerning this matter, please call:    SRY OF ART   STATE	1
(Name of Person) at (954 536 - 1462 57 57 57 57 57 57 57 57 57 57 57 57 57	<u>ب</u>
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\ \times \t	)

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

IRON ENTERP	RISES LLC d/b/a Modern	
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records.)  Display Company)	
The Articles of Organization for this Limited Liability Comparing Local Plorida document number Local Plorida Plorida Plorida Document number Local Plorida	any were filed on $9/25/07$ and assigned $7/27$	
This amendment is submitted to amend the following:		
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 "L "L.L.C."	imited Liability Company," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	09 SEC 09	
	ARE THAT	
Enter new mailing address, if applicable:	SSE S	
(Mailing address MAY BE A POST OFFICE BOX)	m <sub>o</sub>	
R If amending the registered agent and/or registered	office address on our records, enter the name of the new	
registered agent and/or the new registered office address h		
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida street address)	
	, Florida	
	(City) (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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Address Type of Action Title Susana A. Callay ☐ Add Remove 🗂 Add Remove \_\_\_ Add ☐ Remove ☐ Add ☐ Remove ┌ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member TYPED OF Printed name of signee

Page 2 of 2

Filing Fee: \$25.00