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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Brookly Boy Z LLC (Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Stetano La Gotti MGRM (Name of Person)
Brooklyn Boyz, LLC (Firm/Company)
13455 S. W. 165 # 410 F (Address)
Pembroke Pines FL. 33027 (City/State and Zip Code)
For further information concerning this matter, please call:
SteFano La Gotti, MGRM at (305) 343-0695 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status S55.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

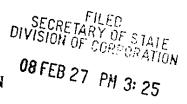
MAILING ADDRESS:

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



(Name of the Limited	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Life Florida document number	iability Company were filed on 09/26/07 and assigned 098433	
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	f the limited liability company here:	
The new name must be distinguishable and end wit "L.L.C."	th the words "Limited Liability Company," the designation "LLC" or the abbreviation	
B. 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 here:		
Name of New Registered Agent:	Sterano La Gotti	
New Registered Office Address:	13455 S. W. 16 ^{c±} # 410 F (Enter Florida street address)	
	Pembroke Pines Florida 33027 (City) (Zin 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)

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 Type of Action <u>Title</u> **Name Address** MGRM Vito Gio Vinco

MGRM Yelson Maradiaga Remove Add Remove Add Remove \Box 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 or printed name of signee

Page 2 of 2

Filing Fee: \$25.00