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SECRETARY OF STATE
TALL AHASSEF FLORIDA

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COVER LETTER

TO:	: Registration Section Division of Corporations	4′ ·
SUBJI	BJECT: TOMASSO VENTURES, LLC (Name of Limited Liability Company)	
The en	enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please	ase return all correspondence concerning this matter to the following:	
	IRINA GRINEVICH (Name of Person)	+
	(Firm/Company)	
	10167 W SUNRISE F	31vd #303_
	PLANTATION, FC 332 (City/State and Zip Code	
For fui	further information concerning this matter, please call:	
	(Name of Person) at (954) (Area Co	de & Daytime Telephone Number)
Enclos	losed is a check for the following amount:	
⊠ \$25	\$25.00 Filing Fee \$\ \text{S30.00 Filing Fee \& Certificate of Status} \text{S55.00 Filing Fee \} \text{Certified Copy (additional copy}	Certificate of Status &

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

07 DEC 24 AM 9: 39

SECRETARY OF STATE TALLAHASSEE FLORIDA

		MILAHASSEE FLORIDA			
TOWASSO	VENTURES LLC				
(Name of the Limited L	lability Company as it now appears on our lorida Limited Liability Company)	r records.)			
(7.1	ionda Enniced Engolity Company)				
The Articles of Organization for this Limited Lia	bility Company were filed on 10/01	/2007 and assigned			
Florida document number LO3000100362					
This amendment is submitted to amend the follow	vina:				
This amendment is submitted to afficild 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 "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C,"					
D. If amonding the model of the state of the					
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:	Jevome L. Tepos	s ESQ			
Nov Booletand Office Address	10167 11 15 20 200	BUH #202			
New Registered Office Address:	(Enter Flow	rida street address)			
	Dantation				
	(City)	, Florida 33324 (Zin Code)			
	(Chy)	(Dip Conc)			

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 <u>Title</u> Type of Action Name <u>Address</u> NGRIM Ronald Friedman Add Remove Andrew Staubman Remove Add Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary 1747 Dated_ esentative of a member

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00