## L08000000863

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SECRETARY OF STATE DIVISION OF CORPORATIONS

## **COVER LETTER**

TO: Registration S Division of Co					
SUBJECT: SOUTH	MARYL LLC				
		ited Liability Company)	***************************************		
		,			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	ALEXANDRA C. CA				
		(Name of Person)			
	ACC CONSULTING	SERVICES			
		(Firm/Company)			
	6625 FICUS DRIVE				
		(Address)			
MIRAMAR, FLORIDA 33023					
		(City/State and Zip Code)			
For further information	concerning this matter, please of	all:			
ALEXANDRA C. (	CASTANO	at ( 786 · ) 287-6626			
	of Person)	(Area Code & Daytime	Felephone Number)		
Enclosed is a check for t	he 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 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

SECRETARY OF STATE DIVISION OF CORPORATIONS

08 JAN 31 PM 2: 22

(Zip Code)

SOUTHMARYL LLC		≥r	25. 180.
	iability Company as it now appears on our records.) lorida Limited Liability Company)	: 22	STATE
The Articles of Organization for this Limited Lial	bility Company were filed on 01/03/2008	and assign	
Florida document number <u>L0800000863</u>	·		
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of t	the limited liability company here:		
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the designation "LI	C" or the abb	reviation
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>enter th</u> ce address here:	e name of t	<u>he nev</u>
Name of New Registered Agent:			
New Registered Office Address:	(Enter Florida street addi	ress)	
	Florida		

## 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.

(City)

(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> <u>Name</u> <u>Address</u> **Type of Action** HIDELBRANDO G. MGRM 591 BRICKELL AVE ✓ Add HERNANDEZ UNIT 3805 MIAMI, FL 33131 Remove HIDELBRANDO G. MGRM 3804 SAN SIMEON CIRCLE HERNANDEZ WESTON, FL 33331 Add Remove Remove  $\mathbb{I}_{Add}$ Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) AMENDING PRINCIPAL ADDRESS AND MAILING ADDRESS TO REFLECT -591 BRICKELL AVENUE **UNIT 3805** MIAMI, FLORIDA 33131 Dated JANUARY 18 2008 Signature of a member or authorized representative of a member HIDELBRANDO G. HERNANDEZ

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00