# 10800011692

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G. MCLEOD

MAR - 4 2008

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: AIB SERVICES 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:	
JOSE TERRY (Name of Person)	
(Table of Follow)	
AIB SERVICES LLC (Firm/Company)	
( <sub>p</sub> <sub>y</sub> )	
13499 BISCAYNE BOULEVARD TOWER SUITE 4 (Address)	
NORTH MIAMI, FL 33181 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Arnold M. Preston <u>at (305 ) 919-9727</u>	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee,  Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	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** 

FIGED SECRETARY OF STATE DIVISION OF CORPORATION:

08 MAR -3 PH 12: 46

AIB SERVICES LLC				
(Name of the Limited	l <b>Liability Compar</b> A Florida Limited L	ny as it now appears on our reciability Company)	ords.)	
The Auditor of Ourseinstian for this Limited I	ichility Company	wara filad on Ephruany 01	2008 and assigned	
The Articles of Organization for this Limited L	лавину Сотрану	were fried on it ebruary of,	and assigned	
Florida document number <u>L08000011692</u>	·			
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	of the limited liab	ility company here:		
N/A				
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ted Liability Company," the desi	gnation "LLC" or the abbreviation	
B. If amending the registered agent and registered agent and/or the new registered o			, enter the name of the new	
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
,	(Enter Florida street address)			
	N/A	, F	lorida	
		(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 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 = M MGRM =	lanager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>MGR</u>	Luis Espinoza	231 Costanera Rd Coral Gables, FL 33143	✓ Add  Remove
MGR	Rene M. Cambert	15521 NW 83 Ave Miami Lakes, FL 33016	✓ Add Remove
			AddRemove
			AddRemove
			Add Remove
	<u>.</u>		AddRemove
D. If ame	nding any other information, enter o	change(s) here: (Attach additional sheets, if neces	isary.)
-		-	
-			
Dated	02/27/08		
	- 11	ember or authorized representative of a member	
	Jose Terry	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00