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J. BRYAN

AUG - 5 2008

EXAMINER

COVER LETTER

Division of Co	rporations		
SUBJECT: 3- ANC	GLE DEVELOPMEN	T GROUP, LLC	
•		ited Liability Company)	-
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		E P WARD MENA	
	Col	(Name of Person)	OB AUG -4
		(Firm/Company)	G-4
		12220 SW 102 AVE	PH RPO
		(Address)	L PH 2: 12
		MIAMI, FL 33176	12 OKS
		(City/State and Zip Code)	
For further information	concerning this matter, please c	all:	
EDWARD MENA		at (786) 346-6642	
(Name of Person)		(Area Code & Daytime T	elephone Number)
Enclosed is a check for t	the following amount:		
2 \$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:		STREET/COURIER	ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	E DEVELOPMEN			7 P000
(<u>Name of the Limited</u> (.	d Liability Compa: A Florida Limited L	ny as it now appea Liability Company)	rs on our records.)	PH 2: 12
The Articles of Organization for this Limited I. Florida document numberL08000013792	Liability Company	were filed on	FLORIDA	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name o	of the limited liab	ility company her	<u>·e</u> :	
The new name must be distinguishable and end w 'L.L.C."	ith the words "Limi	ted Liability Compa	any," the designation "	LLC" or the abbreviation
Enter new principal offices address, if appli	12220 SW 102 AVE			
Principal office address MUST BE A STREI	MIAMI, FL 33176			
		<u> </u>		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	12220 SW 102 AVE			
(Mailing address MAY BE A POST OFFICE BOX)		MIAMI, FL 33176		
B. If amending the registered agent and registered agent and/or the new registered o			our records, <u>enter</u>	the name of the new
Name of New Registered Agent:	EDWARD ME	NA .		
New Registered Office Address:	12220 SW 10	2 AVE		
		(E)	nter Florida street ad	ldress)
		MIAMI	, Florida <u>33</u>	
		(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. Thereby 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 **Title** <u>Name</u> <u>Address</u> **Type of Action** MGR ISAAC BRUK 1160 SW 159 TERRACE ■ Add Remove PEMBROKE PINES FL 33027 ANGEL DELGADO MGR 3540 SW 15 STREET MIAMI, FL 33145 Remove ∫¶ Add Remove ☐ Add Remove _ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated JULY 31 Signature of a member or authorized representative of a member EDWARD MENA Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00