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EXAMINER



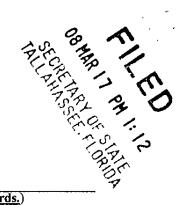
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Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Document #) (Corporation Name) (Document #) (Corporation Name) Certified Copy Pick up time Walk in Photocopy Certificate of Status Will wait 🎜 Mail out **NEW FILINGS** <u>AMENDMENTS</u> Profit Amendment Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent Limited Liability Domestication Dissolution/Withdrawal Other Merger REGISTRATION/QUALIFICATION **OTHER FILINGS** Annual Report Foreign Limited Partnership Fictitious Name Reinstatement Trademark Other

Examiner's Initials

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



	NEW ORRO III O	The state of the s
(Name of the Limited	NEW OPPS, LLC Liability Company as it now appears of Florida Limited Liability Company)	7/
(A	Florida Limited Liability Company)	
The Articles of Organization for this Limited L	iability Company were filed on MARC	CH 11 2008 and assigned
Florida document number <u>L08000025215</u>	·	
This amendment is submitted to amend the following	owing:	
A. If amending name, enter the new name of	f the limited liability company here:	
NewOps, LLC		
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 the new registered of		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida street address)	
	(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:

or managing member being added or removed from our records:	
MGR = Manager	
MGRM = Managing Member	

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	DEVAL BROWN	6411 NW 29 STREET SUNRISE, FL 33313	Add Remove
MRG	JERMAINE WILLIAMSO	N 3625 NW 204 TERRACE MIAMI, FL 33056	Add Remove
			Add Remove
	_		Add Remove
			Add Remove
			Add Remove
D. If ar	nending any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	
	CHANGE ADDRESS: ARTICL	E II	_
	1340 NW 207 STREET SUITE	A	_
	MIAMI, FL 33169		
			_
Dated _	03/14/08 Mil		
	Signature of a r	nember or authorized representative of a member	
		Typed or printed name of signee	

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