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D. BRUCE

JUL 28 2009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	ECT: Espo Fam Fos d LLC Name of Limited Liability Company		
The en	aclosed Articles of Amendment and fee(s) are submitted for filing.		
Please	return all correspondence concerning this matter to the following:		
	USG Espants Name of Person		
	Firm/Company		
	III SW Marta Downs Blvd	O9 JUI	
	Palm C, ty, FL 34990 City/State and Zip Code 1050034600, com E-mail address: (to be used for future annual report notification)	L27 PH 3: TARY OF STI	
For fu	rther information concerning this matter, please call:		
	Vame of Person at (772) 933 - 1996 Area Code & Daytime Telephone Number		
	(additional copy is enclosed) Certified	te of Status &	1)

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

Espo tam to	ood, LLC
(Name of the United Liability Compa (A Florida Limited)	iny as it now appears on our records. Liability Company)
	1
The Articles of Organization for this Limited Liability Company	were filed on 3/13/3008 and assigned
Florida document number <u>LO 9 00 00 2 6 1 6 1</u>	
This amendment is submitted to amend the following:	
•	
A. If amending name, enter the new name of the limited lial	olity company here:
The new name must be distinguishable and end with the words "Lim "L.L.C."	nited Liability Company," the designation "LLC" or the abbreviation
	DIO.
Enter new principal offices address, if applicable:	1111 SW Martin Downs Blue
(Principal office address MUST BE A STREET ADDRESS)	Palm City, FL 34990
Enter new mailing address, if applicable:	IIII Sus Marta Downs Blud
(Mailing address MAY BE A POST OFFICE BOX)	Parn City, FL 34990
	<u> </u>
	A Section 1
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	
registered agent and/or the new registered office address ne	
Name of Name Designated Assets	82 7 F
Name of New Registered Agent:	<u> </u>
New Registered Office Address: 1111 5	W Martin Down & Blado
_	Enter Florida street addr
Par	м Ст Му "Florida 34990
	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 = Manager MGRM = Managing Member **Title Name Address Type of Action** MGR Rea Cabrales

MGR Rea Esposito ___ Add ☐ Remove Add Remove □Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00