L08000035844

(Requestor's Name)	
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PICK-UP WAIT MAIL	
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(Document Number)	
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Cf. 9-23

COVER LETTER

TO: Registration Sect Division of Corpo		•					
SUBJECT: Largo Holdings, LLC (Name of Limited Liability Company)							
	(Name of Limi	ted Elaotity Company)					
The enclosed Articles of Amendment and fee(s) are submitted for filing.							
Please return all correspond	dence concerning this matter t	to the following:					
	Joan M. Hagar						
		(Name of Person)					
	Auro S Management, LLC						
		(Firm/Company)					
	15215 Cortez Boulevard						
		(Address)					
	Brooksville, Florida 34613						
		(City/State and Zip Code)					
For further information con	For further information concerning this matter, please call:						
Joan M. Hagar		at (352) 799-0046					
(Name of	Person)	(Area Code & Daytime To	elephone Number)				
Enclosed is a check for 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:

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 ARTICLES OF ORGANIZATION **OF**

FILED 2008 SEP 22 PM 2: 18

Largo Holdings, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed	on April 8, 2008 and assigned					
Florida document number <u>I 08000035844</u>						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liability comp	pany here:					
The new name must be distinguishable and end with the words "Limited Liabilit "L.L.C."	y Company," the designation "LLC" or the abbreviation					
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADDRESS)						
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)						
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:						
Name of New Registered Agent:						
New Registered Office Address:	(Enter Florida street address)					
	,					
(City)	, Florida (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 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		
MGR	Auro S Management, LLC	15215 Cortez Boulevard Brooksville, Florida 34613	Add Remove		
MGR	Auro Management, LLC	15215 Cortez Boulevard Brooksville, Florida 34613	Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
D. If amendi	ng any other information, enter chan	ge(s) here: (Attach additional sheets, if necessa	ry.)		
					
Dated August	29 , 2008				
-	200h	er or authorized representative of a member	2009 SEP		
-	Pariksith Singh \	d or printed name of signee	55 22 F		
Page 2 of 2					
	!	Filing Fee: \$25.00	PH 2: 16		