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SECRETARY OF STATE
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T. HAMPTON

MAY 2 0 2008

EXAMINER

COVER LETTER

	tion Section of Corporations					
SUBJECT: Gua	acuco. LLC	4				
Sebuber	(Name of Limited Liability Company)					
The enclosed Articl	eles of Amendment and fee(s) are submitted for filing.					
Please return all con	orrespondence concerning this matter to the following:					
	Elena M Espino					
	(Name of Person)					
	(Film/Company)					
	382 Lakeview Dr. #101,	•				
	(Address)					
Weston FI, 33326						
	(City/State and Zip Code)					
For further informat	ation concerning this matter, please call:					
Clara M. Carina	054 5520457					
Elena M Espino	Name of Person) at (954) 5520457 (Area Code & Daytime Telephone Number)	-				
Enclosed is a check	c for the following amount:					
☑ \$25.00 Filing Fe	certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy (additi	tatus &				

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

ARTICLES OF ORGANIZATION

OF

GUACUCO,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 10,2008

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address, if applicable:

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)
	Florida

(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

(Mailing address MAY BE A POST OFFICE BOX)

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, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>		Address	Type of Action
MGRM	JUAN CARLOS	AREVALO	382 LAKEVIEW DR, #101 WESTON FL, 33326	Add Remove
				Add Remove
	<u> </u>	· · · · · · · · · · · · · · · · · · ·		Add Remove
				- Damara
				T Domovo
<u></u>				Add Remove
D. If am	nending any other inform	nation, enter change	(s) here: (Attach additional sheets, if ne	ecessary.)
				FIL 08 MAY I SECRETIAR TALLAHASS
				PR 3:
Dated	MAY 16	, 2008	or authorized representative of a member	DA 55
		NA M. ESPINO	of a member	
			or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00