108000047660

(Re	equestor's Name)			
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only





800136916158

10/20/08--01061--004 **200.00



M. THOMAS

OCT 2 1 2008

EXAMINER

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Company as it now appears on our record mited Liability Company)	<u>s.</u>)
mpany were filed on 05/13/2008	and assigned
ed liability company here:	
s "Limited Liability Company," the designat	ion "LLC" or the abbreviation
ESS)	90 dc
	17 20 #558 #558
	EF, FI
	STATE ORID
	≱ ^m tn
red office address on our records, <u>er</u> <u>ss here</u> :	nter the name of the new
(Posterio Pilotti	
(Enter Florida street address)	
, Floric	la(Zip Code)
	mpany were filed on 05/13/2008 and liability company here: "Limited Liability Company," the designate (Enter Florida street). "Enter Florida street.", Florida street.

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 an inding 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>	Address	Type of Action
<u>VP</u>	Mark Taitt	SUITE 690 MIAMI FL 33126	□ ☐ Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Adec 38
D. If amen	nding any other information, e	nter change(s) here: (Attach additional sheets, if ne	DB OCT 20 PH 1:45 REMOVE OF STATE CESSARY.) CESSARY.
- -			
Dated	October 7		
	Signature	of a member or authorized representative of a member	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00