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EXAMINER

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FROM : LAZARUS

FAX NO. :3052201440

Nov. 04 2009 01:43PM P2

## H 0 9 0 0 0 2 3 4 7 4 2 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it non-Appears on our records.)  (Name of the Limited Liability Company)  The Articles of Organization for this Limited Liability Company were filed on OS/24(CB) and assumed torida document number LOBOCOGISG.  It amendment is submitted to amend the following:  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."  The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation LLC."  The new principal offices address, if applicable:  Trincipal office address, MUST BE A STREET ADDRESS)  SUNFISC. FL 33327  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 33377  (City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  New Registered Agent's Signature, if changing Registered Agent:		Cail 110	er e
be Articles of Organization for this Limited Liability Company were filed on OC/24(08 and assigned torida document number 1000006(56.1)  his amendment is submitted to amend the following:  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."  Inter new principal offices address, if applicable:  Trincipal 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]  SUNDSE I Plorida 3 3 3 7 7  (City)  (Enter Florida 3 3 3 7 7  (City)  (Enter Florida 3 3 3 7 7  (Expected Agent's Signature, if changing Registered Agent)	(Name of the Limited Liability Compa	ov as it now Appears on our records.)	- <u> </u>
his amendment is submitted to amend the following:  If amending name, enter the new name of the literated liability company here:  The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation LLC."  The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation LLC."  The new principal offices address, if applicable:  Inter new principal offices address, if applicable:  Inter new mailing address, MIST REASTREET ADDRESS)  SUNFISCE FL 33327  Enter new mailing address, if applicable:  [Mailing address MAY BE A POST OFFICE BOX)  SUNFISCE FL 33327  Enter new mailing the registered agent and/or registered office address on our records, enter the name of the new registered sugent and/or the new registered office address bere:  Name of New Registered Agent:  New Registered Office Address:  [Enter Florida Street address]  SUNFISCE I POOR 33327  (City)  (Dip Code)  New Registered Agent's Signature, if changing Registered Agent:	(A Florida Limited J	lability Company)	The same of the sa
his amendment is submitted to amend the following:  If amending name, enter the new name of the literated liability company here:  The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation LLC."  The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation LLC."  The new principal offices address, if applicable:  Inter new principal offices address, if applicable:  Inter new mailing address, MIST REASTREET ADDRESS)  SUNFISCE FL 33327  Enter new mailing address, if applicable:  [Mailing address MAY BE A POST OFFICE BOX)  SUNFISCE FL 33327  Enter new mailing the registered agent and/or registered office address on our records, enter the name of the new registered sugent and/or the new registered office address bere:  Name of New Registered Agent:  New Registered Office Address:  [Enter Florida Street address]  SUNFISCE I POOR 33327  (City)  (Dip Code)  New Registered Agent's Signature, if changing Registered Agent:	he Articles of Organization for this Limited Liability Company	were filed on 06/24/08	and assigned
his amendment is submitted to amend the following:  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."  The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation LLC."  Internew principal offices address, if applicable:  Internew principal offices address, if applicable:  Internew mailing address,	lorida document numberLOBOCOG[56.]		
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he 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:    Trincipal office address MUST BE A STREET ADDRESS  SUNUSE FL 33322	his amendment is submitted to amend the following:		100 N
Enter new principal offices address, if applicable:    Trincipal office address MUST REASTREET ADDRESS  SUNFISE FL 33327	. If amending name, enter the new name of the limited liab	llity company here:	
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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]  SUNPISE FL 33327  [Enter Florida street address]  [Enter Florida 33327  (City)  [City]  New Registered Agent's Signature, if changing Registered Agent:		ted Liability Company," the designation	"LLC" or the abbreviation
Enter new mailing address, if applicable:  (Malling 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 bere:  Name of New Registered Agent:  New Registered Office Address:    SOO   W WATERSIDE CIRCUE (Enter Florida street address)	Enter new principal offices address, if applicable:	15801 W WATE	PSIDE CIRCU
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:    DCAR A VEGA	Principal office address MUST BE A STREET ADDRESS)	SUNPISE FL	33327
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:    DCAR A VEGA			
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Name of New Registered Agent:  New Registered Office Address:    Sol   Ware Florida street address			
New Registered Office Address: 1580  W WATERSIDE CIRCUS  (Enter Florida street address)  SUNIZISE   Florida 33327  (City) (Zip Code)  New Registered Agent:	B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	fice address on our records, <u>ente</u> g:	r the name of the new
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New Registored Agent's Signature, if changing Registered Agent:	·	(City)	(Zip Code)
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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. Moreovy confirm that the limited liability company has been notified in writing of this change.

(If Changing Registered Agent, Signature of New Registered Agent)

FROM : LAZARUS

FAX NO. :3052201440

Nov. 04 2009 01:44PM P3

H09000234742

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>	Name	Address	Type of Action
MGRM	Luis E. Suarez		
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D. If amend	ling any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	)
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