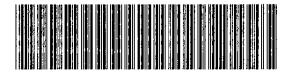
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SECRETARY OF STATE
FALLAHASSEE, FLORID.

J. BRYAN

MAR 2 2 2011

**EXAMINER** 

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: EPE Exterpise LLC (Name of Limited Liability Company)
(Name of Limited Liability Company)  The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  Alejandio Caliudez  (Name of Person)
Please return all correspondence concerning this matter to the following:
Alejandro Calindez (Name of Person)
EPPE Enterprise (Firm/Company)
126 sw 17th Road . #402
Tiami, FL 33129 (City/State and Zip Code)
For further information concerning this matter, please call:
Algado Calindez at (305) 491-9541  (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \text{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 TO ARTICLES OF ORGANIZATION OF



3993	Euterprise, UC		Constitution of the consti
(Name of the Limited L (A F	iability Company as it now appear lorida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liab Florida document number <u>(                                   </u>	bility Company were filed on H0Z .	7/01/2008	and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability company he	<u>re</u> :	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Comp	any," the designation '	'LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered offi		our records, <u>enter</u>	the name of the new
Name of New Registered Agent:	12077 1704		<u>.</u>
New Registered Office Address:	13022 sw 1704 Tiami	<b>St</b> Enter Florida street a	ddress)
	Tiami	, Florida	33186 (Zip Code)
	(City)	<u></u>	(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** Address Type of Action <u>Name</u> Remove Add Remove 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 epresentative of a member Galindez Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00