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OB SEP 11 AM 11: 47
SECRETARY OF STATE
ALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Elijah International Enterprises, LLC. (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:
Charles E. Smith TR. (Name of Person)
ElijaH International Enterprises, LLC. (Firm/Company)
Elijat International Enterprises, LLC. (Firm/Company) 2882 Gulf to Boy Blud. suits#204 (Address)
Clearwater, FLorida 33759 (City/State and Zip Code)
For further information concerning this matter, please call:
CHaples E. Smith Ja. at (727) 831-7136 (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{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ \$\ \text{Certified Copy} \\ \text{(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 FILED TO ARTICLES OF ORGANIZATION SEP 11 AMII: 47

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

	TALLA	HASSEE FLORIDA	
(Name of the Limited Liability Com (A Florida Limited	LLC.		
(Name of the Limited Liability Com	pany as it now appears on ou	r records.)	
(A Florida Limite	ed Liability Company)		
The Articles of Organization for this Limited Liability Compa			
The Articles of Organization for this Limited Liability Compa	any were fried on Frong 7 1	and assigned	
Florida document numberL08000074877			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited I	iability company here:		
EliJAh International Enterpris The new name must be distinguishable and end with the words "L	ses, LLC.		
The new name must be distinguishable and end with the words "L" L.L.C."	imited Liability Company," the	designation "LLC" or the abbreviation	
L.L.C.	/		
Enter new principal offices address, if applicable:	WA		
(Principal office address MUST BE A STREET ADDRESS			
Enter new mailing address, if applicable:	N/A		
(Mailing address MAY BE A POST OFFICE BOX)	γ,		
			
B. If amending the registered agent and/or registered		ords, enter the name of the new	
registered agent and/or the new registered office address	<u>here</u> :		
J	11/		
Name of New Registered Agent:	V/A		
New Registered Office Address:			
	(Enter Florida street address), Florida (City) (Zip Code)		
	(City)	(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 = Ma MGRM = N	nnager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
		MA	Add Remove
			Add Remove
D. If amen	ding any other information, enter	change(s) here: (Attach additional sheets, if necess	ary.)
			A CO M
		ranga da kanana da k	
Dated	Charles & Signature of a s	member or authorized representative of a member	<u>. </u>
	CHARIGS E	Typed or printed name of signee	

Page 2 of 2

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