L08000081500

•					
, (Requestor's Name)					
(Address)					
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D. BRUCE
SEP 0 3 2008
EXAMINER

COVER LETTER

TO: Registration Se Division of Cor	ection porations		
SUBJECT: REVC-	The Moors 6006, LL	С	
		ited Liability Company)	
•			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Alberto M. Aguiar	(Name of Person)	
		(Name of Person)	
	Aguiar & Company, P.A.		AS S
		(Firm/Company)	TAR SE
	6500 Cow Pen Road Sui	te 202	-2 SSS
		(Address)	P T
	Miami Lakes, FL 33014		PM 12: OL. EE. FLORID
		(City/State and Zip Code)	HIZ: OL.
For further information of	concerning this matter, please c	o.11·	P
roi iuittiei iiioiiiiatioii c	concerning this matter, please c	dii.	
Alberto M. Aguiar		at (<u>305</u>) 558-8964	
(Name	of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check for the	•		
□ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
·			
MAIL	ING ADDRESS:	STREET/COURIER	ADDRESS:
Registration Section		Registration Section	
Division of Corporations P.O. Box 6327		Division of Corporation Clifton Building	
Tallah	assee, FL 32314	2661 Executive Center Tallahassee, FL 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

, REVC-The Moors 6006, LLC		
(<u>Name of the Limited Liability</u> (A Florida l	Company as it now appears on our re Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability C	Company were filed on 8/26/08	and assigned
Florida document number L08000081500	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and end with the wor" IL.C."	rds "Limited Liability Company," the des	signation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		03 TAL
(Principal office address MUST BE A STREET ADDI	RESS)	<u> </u>
Enter new mailing address, if applicable:		ASSEC. F
(Mailing address MAY BE A POST OFFICE BOX)		Z: NL, STATE LORIDA
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		is, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	(Enter Florid	a street address)
	. I	Florida
	(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 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'.	<u>Name</u>	Address	Type of Action
MGRM	Ruben Venture Capital, LLC	8416 NW 201 Street Miami, FL 33015	Add Remove
MGRM_	Rubal Venture Capital, LLC	8416 NW 201 Street Miami, Fl 33015	Add Remove
			Add Remove
	V-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		Add Remove
			Add Remove
			Add Remove
D. If amendi	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary)	PHID:
Dated August	Signature of a member	or authorized representative of a member	

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Filing Fee: \$25.00