

LD8000082472

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

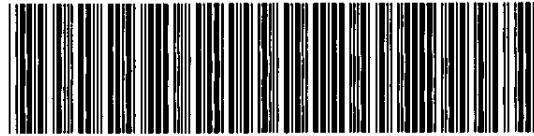
Special Instructions to Filing Officer:

L. SELLERS

SEP - 5 2008

EXAMINER

Office Use Only



800134584038

RECEIVED

08 SEP - 5 AM 10: 56

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

08 SEP - 5 PM 2: 51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 701281 7666515

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : August 27, 2008

ORDER TIME : 9:0 AM

ORDER NO. : 701281-005

CUSTOMER NO: 7666515

DOMESTIC AMENDMENT FILING

NAME: ZECHI, LLC

XX ARTICLES OF AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret -- EXT# 2949

EXAMINER'S INITIALS: _____

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

08 SEP -5 AM 2:51

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

ZECHI, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/28/2008 and assigned Florida document number L08000082472.

This amendment is submitted to amend the following:

A. 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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal 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)

(City)

, Florida

(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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ULRIKE PORR	27000 PORTOFINO CIR SUITE 101 LM BEACH GARD FL 33418	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	ERIKA AUTA PORR	27000 PORTOFINO CIR SUITE 10 LM BEACH GARD FL 33418	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	ANDRE MARTINS	27000 PORTOFINO CIR SUITE 10 LM BEACH GARD FL 33418	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

ARTICLE IV - THE TITLE FOR EACH MEMBER SHALL BE:

MANAGER "MGR"

THE ENTITY SHALL BE MANAGER MANAGED.

Dated

Sept 4, 2008

Signature of a member or authorized representative of a member

Andre Martins

Typed or printed name of signee