

04/22/2009 16:09

3050851098

BERRIZ & GIRALDO

PAGE 01
Page 1 of 2

Division of Corporations

L08000083110

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000098086 3)))



H090000980863ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : BERRIZ & GIRALDO P.A.
Account Number : I19990000017
Phone : (305) 485-9300
Fax Number : (305) 485-1098

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 APR 22 AM 8:04

RECEIVED

09 APR 22 PM 4:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LO AMND/RESTATE/CORRECT OR M/MG RESIGN

J.R BERNAL PRODUCTIONS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

T. HAMPTON

APR 23 2009

EXAMINER

H09 0000980863.

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

J.R. Bernal Productions, 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 09/02/2008 and assigned Florida document number L08000083110.

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 "LLC."

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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 APR 22 AM 8:04

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)

_____, 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)

CLARA GIRALDO P.A.
4080 SW 84 AVE SUITE C
MIAMI, FL 33155
(305) 485-9300

H09 0000980863.

H09 0000 980863

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	Name	Address	Type of Action
MGR	Bernal, Juan R	15706 SW 72 ST Sk 023 Miami, FL 33193	<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Bernal, Margarita E	15706 SW 72 ST Sk 023 Miami, FL 33193	<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Arango, Oswaldo	15706 SW 72 ST Sk 023 Miami, FL 33193	<input type="checkbox"/> Add <input checked="" 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.)

Delete: MGR Arango, Oswaldo
15706 SW 72 ST #023
Miami, FL 33193

Dated


Signature of a member or authorized representative of a member

Juan R. Bernal
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

H09 0000 980863

FILED
09 APR 22 AM 8:04
SECRETARY OF STATE
DIVISION OF CORPORATIONS