## L08000093844

(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:
·

Office Use Only



100137144481

10/24/08--01010--010 \*\*55.00

RECEIVED

08 OCT 24 MIII: 02

ON OFFICE OF STATIONS

ON OFFICE OF ST



OCT 2 4 2008

EXAMINER





UCC FILING & SEARCH SERVICES, INC. 1574 Village Square Blvd Ste 100 Tallahassee, Florida 32309 (850) 681-6528

HOLD FOR PICKUP BY UCC SERVICES OFFICE USE ONLY

October 24, 2008

## CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Tialoc, LLC

ment (atis)
Frood Standing
cuments to Include endments
]

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HALOC, LLC				
(Name of the Limited Li	ability Company as it now appears on our reco orida Limited Liability Company)	rds.)		
The Articles of Organization for this Limited Liab Florida document number L08000093844		OS OCCUPANT OF LED		
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 t "L.L.C."	he words "Limited Liability Company," the desig	nation "LLC" or the abbreviation		
Enter new principal offices address, if applicab	ele:			
(Principal office address MUST BE A STREET.	ADDRESS)			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO	ox)			
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records ce address here:	, enter the name of the new		
Name of New Registered Agent:				
New Registered Office Address:	(Enter Florida	street address)		
	<i>E</i> 11	orida		
	(Cily)	(Zip Code)		
New Registered Agent's Signature, if changing Re	gistered 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
MGR	Lorenza Azcarraga Romandia	2182 NW 87TH AVE DORAL, FL, 33172	Add Remove
MGR	Lorenza Romandia Azcarraga	2182 NW 87TH AVE DORAL, FL, 33172	Add Remove
MGRM	Lorenza Azcarraga Romandia	2182 NW 87TH AVE DORAL, FL, 33172	Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter chan	nge(s) here: (Attach additional sheets, if ne	cessary.)
Dated	October 23 , 2008	n R. Huley	
		er or authorized representative of a member	
		AMES R. HURLEY	
	Туре	d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00