L08000099507

Office Use Only



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SECRETARY OF STATE
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J. BRYAN

JAN 24 2011

EXAMINER

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	PEPE LLC.		
(Name of the Limited Liability (A Florida I	Company as it now appears	on our records.)	······································
(A Florida I	limited Liability Company)		
The Articles of Organization for this Limited Liability C	ompany were filed on	10/22/2008	and assigned
Florida document numberL08000099507	•		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ted liability company here	:	
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Compan	y," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applicable:			·
(Principal office address MUST BE A STREET ADDR	(ESS)		SECR LA
		<u></u>	15 No. 1
Enter new mailing address, if applicable:			SKE B
(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·	F. S. 72
			PET IO
B. If amending the registered agent and/or regist		ur records, enter t	he name of the new
registered agent and/or the new registered office add	ress nere:		
Name of New Registered Agent:			
New Registered Office Address:	Fut	er Florida street ada	ly are
	Eme		, Ç.O.J
	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

	g the Managers or Managing Me ng Member being added or remov	mbers on our records, <u>enter the title, name, and ad</u> ed from our records:	ldress of each Manager
MGR = Ma MGRM = N	nager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR_	LUZ M. HENAO	13917 FAIRWAY ISLAND DRIVE APT, 933 ORLANDO, FL 32837	Add Remove
MGR_	ADRIANA MOY	2538 ALBACA DRIVE ORLANDO, FL 32837	Add ✓ Remove
MGR	LUZ A. HENAO	13917 FAIRWAY ISLAND DRIVE APT. 933 ORLANDO, FL 32837	Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ding any other information, enter	change(s) here: (Attach additional sheets, if necessar	
			FILED 11 JAN 21 PN 1:20 SECRETARY OF STATE FAULAHASSEE, FLORID
Dated	01-17	<u>2011</u>	• · · · · · · · · · · · · · · · · · · ·
		nember or authorized representative of a member	
		LUZ A. HENAO Typed or printed name of signee	<u></u>