L0800005566

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EXAMINER

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COVER LETTER

TO: Registration S Division of Co					
SUBJECT: FLA CA	ASAS, LLC				
		nited Liability Company)	<u> </u>		
	f Amendment and fee(s) are sul	_			
Please return all corresp	ondence concerning this matter	to the following:			
	ANNA GOLDBY, PARA				
		(Name of Person)	720 TA S		
DILLON & GERARDI, APC			FR D		
(Firm/Company)					
DILLON & GERARDI, APC					
		(Address)	ASSEE, FLC		
SAN DIEGO, CA 92122			자 가 있는 기계 가 기계		
		(City/State and Zip Code)	>		
For further information of	concerning this matter, please of	call:			
TIMOTHY P. DILLON,	, ESQ.	at (858) 587-1800			
(Name of Person)		(Area Code & Daytime Te	elephone Number)		
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	☑\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327		STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center	ns		
Tallahassee, FL 32314		2001 Executive Center	Chicie		

Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLA CASAS, LLC			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company	were filed on NOVEMBER 12, 2008	and assigned	
Florida document number L08000105566			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:	2008 SE(
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation	"Laring or the abbreviation	
Enter new principal offices address, if applicable:	845 NE 18TH AVENUE		
(Principal office address MUST BE A STREET ADDRESS)	FORT LAUDERDALE, FL 33304	<u> </u>	
	USA	984 S	
Enter new mailing address, if applicable:	845 NE 18TH AVENUE		
(Mailing address MAY BE A POST OFFICE BOX)	FORT LAUDERDALE, FL 33304		
	USA		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		r the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
	, Florida	7:- (2-1)	
	(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 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>Address</u> Type of Action <u>Name</u> MGR JAMAL BENDAHMANE 5820 OBERLIN DRIVE, SUITE 202 **□** Add SAN DIEGO, CA 92121 ■ Remove USA_ KARIM ALAMI MGR C/O LOUBNA BENNIS **₽** 7 Add 845 NE 18TH AVENUE Remove FORT LAUDERDALE, FL 33304 USA 🗂 Add Remove Remove Ranove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member KARIM ALAMI, MANAGER Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00