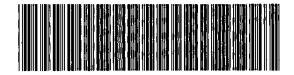
## L08000109745

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)
(Address)
(Address)
,
,
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Sasmoss Siller, Hame)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200208618272

06/13/11--01024--005 \*\*25.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

T. CLINE
JUN 14 2011
EXAMINER

## **COVER LETTER**

CUDIFCT.	TRANSWORL	D DEVELOPERS	LLC		
SUBJECT:		ited Liability Company		_	
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.			
Please return all corresp	oondence concerning this matter	r to the following:			
		MS LILY TRAN  Name of Person			
	TRANS	WORLD DEVELOPE	RS LLC		
		Firm/Company		_	
		2801 NW 74 STE 170 Address	<u> </u>	_	
		MIAMI FL 33122 City/State and Zip Code		_	
	LILY@TRAN E-mail address: (	ISWORLD-DEVELOR to be used for future annual rep	PERS.COM	2011, SECT	
For further information	concerning this matter, please of			2011 JUN 13 SECRETARY ALLAHASSE	and Albania and Andrews and Andrews
М	S LILY TRAN	at ( 201)	4915959		
<del> </del>	of Person	Area Code &	Daytime Telephone Num	ECRETARY OF STATE LORIDA	Sanda a
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is e	Certifi enclosed) Certif	Filing Fee, icate of Status & fied Copy ional copy is enclo	sed)
N/A II	INC ADDRESS.	CTD F F/T /	COUDIED ADDDESS		

TO:

**Registration Section Division of Corporations** 

> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TRANSWOI	RLD DEVELOPERS	LLC		
( <u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appea a Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability	Company were filed on	11/26/08	and assigned	
Florida document numberL08000109745	·			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	nited liability company he	<u>re</u> :		
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Compa	any," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADL	ORESS)	4 1045		
	<del> </del>	A		
Enter new mailing address, if applicable:		SS	2	
		m <sub>c</sub>		
(Mailing address MAY BE A POST OFFICE BOX)		7	2	
	<del>-</del>			
B. If amending the registered agent and/or regi	istand office address on	>		
b. It amending the registered agent and/or regi registered agent and/or the new registered office ad		oui recorus, <u>enter ti</u>	ie name of the new	
Name of New Registered Agent:		<del></del>		
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

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 ROBERTO CASARIEGO 2801 NW 74 AVE STE 170 ☐ Add √ Remove MIAMI FL 33122 MGR AARON CASARIEGO 2801 NW 74 AVE STE 170 ✓ Add Remove MIAMI FL 33122 ☐ Add □ Remove ☐ Add Remove Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 06/08 2011 Dated Signature of a member or authorized representative of a member MS. LILY TRAN Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00