## L09000013///

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## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT

Nge Key West , LLC>

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**David Horowitz** 

Name of Person

Nge Key West, LLC.

Firm/Company

2891 S.W. 69 Court

Address

Miami, FI 33155

City/State and Zip Code

vidaenter@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**David Horowitz** 

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the 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 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NGE KEY WEST, LLC.				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Clability Company)			
The Articles of Organization for this Limited Liability Company Florida document number L0900013111	rticles of Organization for this Limited Liability Company were filed on 02/09/2009 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	pility company here:			
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the designation "LLC" or the abbreviation			
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
	100 ST 100 S			
Enter new mailing address, if applicable:	n I			
(Mailing address MAY BE A POST OFFICE BOX)	97			
	With the			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her				
Name of New Registered Agent:				
New Registered Office Address:	Eutov Elovida atvost address			
	Enter Florida street address			
	, Florida			
	Luv zid Coge			

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records:</u>

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Ruben Gutierrez	2891 S.W. 69 Court	Add
		Miami, FI 33155	Remove
MGRM	David Horowitz	2891 S.W. 69 Court	Add
		Miami, FI 33155	Remove
			Add
			Remove
			Add
		<del>7-</del>	Add
			Add

. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ated	Nov. 15-th 2013
-	auffre
	Signature of a member or authorized representative of a member
	David Horowitz
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00