

LD9000017335

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

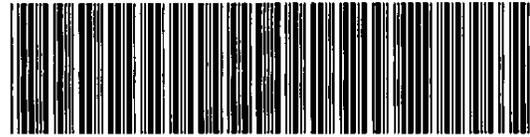
(Business Entity Name)

(Document Number)

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N. Cuzigan OCT 28 2010

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Rojas & Rojas, 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:

Barbara Romero-Rojas
Name of Person

Rojas & Rojas, LLC
Firm/Company

6800 SW 40th Street #159
Address

Miami, Florida 33155
City/State and Zip Code

rojasandrojas@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barbara Romero-Rojas at (305) 322-3532
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**

Rojas & Rojas, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/02/2009 and assigned Florida document number L09000017335.

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 the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

6800 SW 40th Street

Ste. 159

Miami, Florida 33155

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6800 SW 40th Street

Ste. 159

Miami, Florida 33155

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Barbara Romero-Rojas

New Registered Office Address:

6800 SW 40th Street #159

Enter Florida street address

Miami,

City

Florida

33155

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.

Barbara Romero-Rojas
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Barbara Romero-Rojas	6800 SW 40th Street #159 Miami, Florida 33155	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Aida C. Medina	1360 West 35th Street Hialeah, Florida 33012	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Esperanza Medina	1360 West 35th Street Hialeah, Florida 33012	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Michael Romero-Rojas	6800 SW 40th Street #159 Miami, Florida 33155	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Barbara Romero-Rojas

Typed or printed name of signee