L0900007570

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DIVISION OF CORPORATIONS

09 APR -6 PH 1: 55

T. HAMPTON APR - 7 2009

EXAMINER

COVER LETTER

то:	Registration Secti Division of Corpo						
SUBJECT: FIRST FOUR, LLC.							
		(Name of Limi	ted Liability Company)				
The enc	losed Articles of An	nendment and fee(s) are sub	nitted for filing.				
Please r	eturn all correspond	ence concerning this matter t	to the following:				
		ROCHEU	E LE (AVALIER				
			(Name of Person)				
			(Firm/Company)				
		3912 F	PEMBROKE RD				
			(Address)				
		HOLLYN	100D FL 33021				
			(City/State and Zip Code)				
For furt	her information con-	cerning this matter, please ca	ıll:				
	RICHELLE	LE CAVALIER	at (305) 761-810	, 7			
	(Name of F	Person)	(Area Code & Daytime T	elephone 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
Tatlahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FIRST FOUR, 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 2/23/09 and assigned
Florida document number <u>L09000017570</u> .
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
SISCO HOLDINGS, A, LLC.
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: 3912 PEMBROKE RD
Principal office address MUST BE A STREET ADDRESS) HOLLY WOOD FL 33021
Enter new mailing address, if applicable:
Mailing address MAY BE A POST OFFICE BOX)
- RATA
3. 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: ROCHELE LECANALIER
New Registered Office Address: 3912 PEMBROLE RD
(Enter Florida street address)
HOLLYWOOD, Florida FL 3302 (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 = N	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	 		Add Remove
			Add
			Remove
			Add Remove
			Add Remove
	·		Add Remove
			Add Remove
D. If amen	ding any other information, enter c	change(s) here: (Attach additional sheets, if necessary.)	_ 5
_			SECRETARY OF COR
 Dated	412109	,	OF STATE ORPORATIONS
Dawu	RU	Como.	
		ember or authorized representative of a member HEUE LE (WALLER Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00