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2009 MAY -6 PM 12: 08
SECRETARY OF STATE
OF AHASSEE, FLORID

M. THOMAS

MAY -7 2009

EXAMINER

COVER LETTER

TO:	egistration Section ivision of Corporations
SUBJE	: Besidu, LLC Name of Limited Liability Company
The end	ed Articles of Amendment and fee(s) are submitted for filing.
Please i	rn all correspondence concerning this matter to the following:
	Suzanna Perez
	Firm/Company
	GILBRIDE, HELLER & BROWN ONE BISCAYNED SWER 2 S. BISCAYNE BLVD SUITE 1570 MIAMI, FL 33131-1806 City/State and Zip Code
For furt	E-mail address: (to be used for future annual report notification) The property of the proper
	Name of Person at (36) 3583580 Area Code & Daytime Telephone Number
Enclose	a check for the following amount:
\$25.	Filing Fee \$\bigcup \\$30.00 \text{ Filing Fee & }\bigcup \\$55.00 \text{ Filing Fee & }\bigcup \\$60.00 \text{ Filing Fee,} \\ \text{Certificate of Status & }\bigcup \\$additional copy is enclosed) \\ (additional copy is enclosed) \end{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

13esidu L			
(<u>Name of the Limited Ei</u> (A Flo	ability Company as it now appears orida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liabi		and assigned	
This amendment is submitted to amend the following	ing:		
A. If amending name, enter the new name of th	e limited liability company here:		
The new name must be distinguishable and end with th "L.L.C."	ne words "Limited Liability Company	" the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	2009 MAY -6 TALL SEC SINKY SEC SINKY TALL SHI SSI	
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	Estan	Florida atuant adduses	
	Enter Florida street address		
-	City	, Florida 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:

<u>Title</u>	Name	Address	Type of Action
			Add Remove
			PA 12:
D. If amer	nding any other information, enter	change(s) here: (Attach additional sheets, if necessa	Add Remove
	Name Correct Maria Jose	tions - Spelling 2 Remonda Dumor	ntet
-	Haria Be Hector a	len Memonda Du Ugosto Dumontet	<u>mo</u> ntet
Dated	5-4-09		
	Signature of a m	nember or authorized representative of a member Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00