

From: A.S.A.P. Title Corp  
Division of Corporations

305 728 2288

05/20/2009 12:17

#404 P.001/004

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**L09000033769**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : A.S.A.P TITLE CORP.  
Account Number : I20020000017  
Phone : (305) 377-1000  
Fax Number : (305) 377-1055

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TALLAHASSEE, FLORIDA

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AUDY GROUP, LLC

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J. BRYAN

MAY 21 2009

EXAMINER

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From: A.S.A.P. Title Corp.

305 728 2288

05/20/2009 12:17

#404 P.002/004

**COVER LETTER**

(( (H09000125861 3)))

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** AUDY GROUP 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:

Carlos M. Machado, Esq.  
Name of Person

Carlos M. Machado, P.A.  
Firm/Company

2030 Douglas Road, Suite 210  
Address

Coral Gables, FL 33134  
City/State and Zip Code

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

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09 MAY 20 AM 8:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Carlos M. Machado, Esq. at (305) 377-1000  
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

(( (H09000125861 3)))

AUDY GROUP 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 April 7, 2009 and assigned  
Florida document number L09000033769.

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MAY 20 AM 8:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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:

\_\_\_\_\_

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 ~~or~~ Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member


(( (H09000125861 3)))

Title	Name	Address	Type of A
MGRM	AUDY ZEYAD	P.O. Box 402687 Miami Beach, FL 33140	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	ZEYAD AUDY	P.O. Box 402687 Miami Beach, FL 33140	<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
			<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 May 20, 2009



Signature of a member or authorized representative of a member

SHAD EL DOUJELJI

Typed or printed name of signer

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