(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

G. MCLEOD

JAN 19 2010

EXAMINER



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01/15/10--01017--002 **25.00

COVER LETTER

	egistrati ivision o												
SUBJECT	ր.	F	B	F	MIAH	i G	POUP L	LC.					
SUBJECT:				Name of Limited Liability Company									
The enclos	sed Artic	les of	Ame	ndment	and fee(s) are	submitte	ed for filing.						
Please retu	ırn all co	rrespo	onden	ce conce	eming this ma	tter to th	e following:						
				A	11 Fons	ò	Gonzal	ez					
	Al Fonso Gonzalez Name of Person												
FRF HIAM, BROUP LLC.													
			_				Firm/Company						
901 BRICKER Key Blud # 904													
							Address						
				Hi	Ami	FL	33/3 ty/State and Zip Cod	3 /					
					_	Cit	ty/State and Zip Cod	ė					
	arvantovar@hotmail.com												
					E-mail addres	s: (to be	used for future annua	al report notifica	tion)				
For further	r informa	tion (once	rning thi	s matter, pleas	se call:							
10	IAN						at (78 6) 3	216 52	7 6 Telephone Number				
	N	ame c	f Pers	on			Area Co	ode & Daytime T	elephone Number				
Enclosed is	s a check	for t	he fol	lowing a	amount:								
\$25.00	Filing F	ee			Filing Fee & ficate of Status		\$55.00 Filing Fee Certified Copy (additional copy		Certified	te of Status &			

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

DIVISION OF CORP) FSI:
10 JAN 15 PM	ORATION 12: 11

F&F MI	AMI O	SROUP 1	L C.	1.415: 11
(Name of the Limited Li (A F	iability Compa Iorida Limited I	ny as it now appears on Liability Company)	our records.	
The Articles of Organization for this Limited Liab Florida document number 20900038	oility Company 693	were filed on _04/	/22/200	9 and assigned
This amendment is submitted to amend the follow	ring:			
A. If amending name, enter the new name of the	he limited liab	ility company here:		
The new name must be distinguishable and end with t "L.L.C."	the words "Lim	ited Liability Company,"	the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET)		Apt A MIAMI	Fontains FL 3	Heav Blud
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>	9373 7 Apt A	ontainb	lau Blup.
B. If amending the registered agent and/or registered agent and/or the new registered office			records, <u>enter</u>	the name of the new
Name of New Registered Agent:		ALFONSO		
New Registered Office Address:	9375	fontain bleau		
	Win		Florida street aa	
	J-((P	m / City	, Florida _	Zip Code
N				

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 Agen

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

Title. **Type of Action Address** Name MGR Al Fonso Gonzalez 9373 Fontainbleau Blud Add Add A-103 MIAMI FL 33172 Remove

MGR IVAN TOVAR 9373 Funtainbleau Blud DAdd ☐ Add ☐ Remove Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) . 2010 Dated January Signature of a member or authorized representative of a member FAISTO TOUAR

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

January, 10 2010

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Ref: Appointment as MGR

Change of Name of Registered Agent

F & F MIAMI GROUP LLC

EIN: 80-0394123

I, Javier Gonzalez accept the appointment and declare that I am familiar with the obligations of the position \boldsymbol{r}

Alfonso Gonzalez