109000042045

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
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(Bu	siness Entity Nam	ne)
(Do	cument Number)	<u> </u>
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EXAMINER

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SECRETARY OF STATE

COVER LETTER

TO:	Registration S Division of Co	ection rporations			
SÜBJI	ECT:	YOUN	MODIFY, LLC		
0000			ted Liability Company		
The en	closed Articles of	Amendment and fee(s) are sub-	omitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
		J	JONATHAN R. RUBIN Name of Person		
			Name of Person		
JOI		JON	IATHAN R. RUBIN, P.A.		
Firm/Company					
	9360 SUNSET DRIVE, SUITE 285				
Address					
		М	IAMI, FLORIDA 33173		
	City/State and Zip Code				
		JONR	UBIN@BELLSOUTH.NE	<u></u>	
For fur	ther information of	E-mail address: (concerning this matter, please c	to be used for future annual report no	tification)	
		-			
JONATHAN R. RUBIN Name of Person		at (305)	598-7331 ime Telephone Number		
	TVIIII C	71 , 0.30.11	Alloa Codo de Baja	into receptions realised	
Enclose	ed is a check for t	he following amount:	,		
□\$2 5	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sed	
	Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations fox 6327 assee, FL 32314	STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YOUN	MODIFY, LLC		<u>-</u>
(<u>Name of the Limited Liability C</u> (A Florida Lir	nited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Cor	mpany were filed on	April 30, 2009	and assigned
Florida document numberL09000042045	<u>.</u>		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company he	<u>re</u> :	
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Comp	any," the designation "Ll	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	SSS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office addre		our records, <u>enter th</u>	ne name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Er	nter Florida street add	SE 99
	City	, Florida	Zip Gode
New Registered Agent's Signature, if changing Registered	,	みひとに	
I hereby accept the appointment as registered agent an the provisions of all statutes relative to the proper and accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	l complete performance ent as provided for in C	e of my duties, and I a Chapter 608, F.S. Or,	n familiar with and This Deument is

MGR = Manager

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:

MGRM = Managing Member Title <u>Name</u> Address **Type of Action** MGRM KIRENIA GARCIA 4360 S.W. 154 Court _[✓] Add Remove Miami, Florida 33185 JORGE GONZALEZ MGRM 13901 Kendale Lakes Blvd. Remove Miami, Florida 33183 MGRM ANDRIC GUTIERREZ 1535 Cleveland Road Miami Beach, Florida 33141 Remove Remove $\prod Add$ Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Andric Gutierrez - 50% membership interest Kirenia Garcia and Jorge Gonzalez, as tenants in common - 50% membership interest Dated _____ August 25 2009

Page 2 of 2

Filing Fee: \$25.00

Signature of a member of authorized representative of a member

KIRENIA GARCIA

Typed or printed name of signee