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05/31/12--01008--018 **25.00



J. BRYAN

JUN - 1 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Alper F. to h Cap; tal 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:
Alejandro Perez Name of Person
Alper Fitch Capital LLC Firm/Company
995 SW 84 Ave # 208
Miami Florida 33/44 City/State and Zip Code alex 556 605 @ hotmail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alejandro Perez at (786) 897 - 1193 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ Certificate of Status \$\ Certificate of Status \$\ (additional copy is enclosed)\$\$\$ \$60.00 Filing Fee, \$\ Certificate 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 Taliahassee, FL 32301

ARTICLES OF AMENDMENT TO \ ARTICLES OF ORGANIZATION

	of			
(A Florida Li	Company as it now appear mited Liability Company)	11		
The Articles of Organization for this Limited Liability Co	mpany were filed on	05/12/2009 and assigned 3		
Florida document number <u>LO90000</u> 462	291			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limite	ed liability company her	.e :		
The new name must be distinguishable and end with the word: "L.L.C."	s "Limited Liability Compa	any," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	995 S.	W 84 Ave. # 208		
(Principal office address MUST BE A STREET ADDRE	Essi Miami	W 84 Ave. # 208 Florida 33144		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	995 S Miami	Florida 33144		
B. If amending the registered agent and/or registered agent and/or the new registered office addre		our records, enter the name of the new		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	<u> </u>	, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = M MGRM =	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
wake was Provided and American School (See 1999)			Add Remove
			Add Remove
			□ Damova
-			Add Remove
D. If amer	nding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessa	
_			HAY 31
Dated	05/28 . 20	012.	AM 11: 38 EE FLORIDA
	Signature of a member Alejandro (Typed	er or authorized representative of a member e re z d or printed name of signee	

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Filing Fee: \$25.00