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COVER LETTER

	tration Section ion of Corporations	A i
SUBJECT: _	EURO EQUITY HOLDINGS, LLC	· **
	Name of Limited Liability Company	
•		
The enclosed A	Articles of Amendment and fee(s) are submitted for filing.	2
Please return a	Il correspondence concerning this matter to the following:	11. PH 4: 53
	STEPHEN E. PEREZ	
	Name of Person	
	EURO EQUITY HOLDINGS, LLC	
	Firm/Company	
	905 LEE ROAD	•
	Address	
	ORLANDO, FL 32810	
	City/State and Zip Code	
	steve.altura@gmail.com E-mail address: (to be used for future annual report notification)	
For further info	ormation concerning this matter, please call:	
	Laura Hope Richards at (407) 432-4787	
	Name of Person Area Code & Daytime Telephone Number	
Enclosed is a c	theck for the following amount:	
\$25.00 Filin	ng Fee \$\int_\$\$30.00 Filing Fee & \$\int_\$\$55.00 Filing Fee & \$\int_\$\$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) 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

EURO E	QUITY HOLDINGS, I	LLC	
(<u>Name of the Limited Lial</u> (A Floi	bility Company as it now appearida Limited Liability Company)	rs on our records.)	
(*****	, , , , , , , , , , , , , , , , , , ,		
The Articles of Organization for this Limited Liabil	ity Company were filed on	JUNE 3, 2009	and assigned
Florida document number L0900054169			
Twitted document manager	·		至 🦂
This amendment is submitted to amend the following	g:		S. F.
A. If amending name, enter the new name of the	limited liability company he	re:	
The new name must be distinguishable and end with the	words "Limited Liability Comp	any " the designation "L	C" or the abbreviation
"L.L.C."	words Elimica Elability Comp	any, the designation is	ee of the above thick
C.4			
Enter new principal offices address, if applicable			
(Principal office address MUST BE A STREET A	DDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>		
B. If amending the registered agent and/or r	egistered office address on	our records, enter th	ie name of the nev
registered agent and/or the new registered office		,	
·.			
Name of Nau Pagistared Avents			
Name of New Registered Agent:			
New Registered Office Address:		· <u> </u>	
	E	nter Florida street addr	ess
		. 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 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** <u>Name</u> Address MGR LAURA H. RICHARDS **✓** Add 905 LEE ROAD Remove ORLANDO, FL 32810 ☐ Add Remove ☐ Remove ☐ Add Remove Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 6/11/12 a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00