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Certificates of Status

L. SELLERS

JUL 1.4 2010

**EXAMINER** 

Office Use Only



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07/12/10--01011--016 \*\*25.00

## ... COVER LETTER

TO: Registration Sec Division of Corp	
suвјест: <u>А</u> у	Name of Limited Liability Company
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.
Please return all correspor	dence concerning this matter to the following:
	Ricardo Bowen Name of Person
	America's Tech Trade
	1625 Orion Lane
	Weston FL 33327 City/State and Zip Code
	Vocation & AMERICASTT. Com  E-mail address: (to be used for future annual report notification)
For further information co	ncerning this matter, please call:
Ricardo Name of	Person at (786) 499 - 3122  Area Code & Daytime Telephone Number
Enclosed is a check for the	following amount:
\$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status 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

(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 v	vere filed on	24/09	and assig	ned			
Florida document number <u>L090006144</u>	2						
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the limited liability	ty company here:						
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company,"	the designation "l	LC" or the abb	previation			
Enter new principal offices address, if applicable:	1625	Drie	on La	ne_			
(Principal office address MUST BE A STREET ADDRESS)	Weston	FL	333	27			
Enter new mailing address, if applicable:	1625	Orion	Lane				
(Mailing address MAY BE A POST OFFICE BOX)	Uleston	FL	3332	<del>.</del> 7			
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our r	ecords, <u>enter t</u>	he name of t	the new			
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·		77			
New Registered Office Address:	Enter Fl	orida street add	IZ PH :				
	City	, Florida	Exp Conte				
New Registered Agent's Signature, if changing Registered Agent:			ري اران				

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

MGR = Manager

MGRM = Managing Member **Type of Action** Title . Address <u>Name</u> MG RM Julio Diaz\_ Remove Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member RICARDO Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00