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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON
JUL 18 2010
EXAMINER

COVER LETTER

	ration Section on the section of Corporations	·
SUBJECT:	D & Y Development	
	Name of Limited Liability Company	
•		
The enclosed Ar	rticles of Amendment and fee(s) are submitted for filing.	
Please return all	l correspondence concerning this matter to the following:	
	Dennis R. Bedard	
	Name of Person	
	Dennis R. Bedard, Attorney at Law	ومهما على المحمد والما المحمدي
	Firm/Company	
	1717 North Bayshore Drive, Suite 215	
	Address	
	Miami, Florida 33132	
	City/State and Zip Code	
	dennisbedard@mac.com E-mail address: (to be used for future annual report notification)	
For further infor	rmation concerning this matter, please call:	
	Dennis R. Bedardat (_305)5300795	
•	Name of Person Area Code & Daytime Telephone Number	
Enclosed is a ch	neck for the following amount:	
\$25.00 Filing		z Fee.
به این در در در در این		of Status & -
		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 (A Florida I	Development, LLC Company as It now appears on a Limited Liability Company)	ur records.)	
The Articles of Organization for this Limited Liability C Florida document number L0999990401		ly 9, 2009 :	and assigned
This amendment is submitted to amend the following:		1	
A. If amending name, enter the new name of the limi	ited liability company here:	<u>.</u>	•
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Company," tl	he designation "Ll	C" or the abbreviation
Enter new principal offices address, if applicable:		,	9
(Principal office address MUST BE A STREET ADDR	RESS)		SE VIS
Enter new mailing address, if applicable:		, !	RETARY OF CORPC
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office add		ecords, <u>enter th</u>	AT A
Name of New Registered Agent:			
New Registered Office Address:	Enter Fl	- orida 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 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 Title Type of Action <u>Name</u> <u>Address</u> MGRM Monique:Planelles Guigui 9801 Collins Avenue **✓** Add Unit 12P Remove Bal Harbour, Florida 33154 Add Remove ☐ Add → Remove Add Remove □Add Remove Add . Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) December 30 2009 a member or authorized representative of a member. Jonathan Guigui Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00