

L 09 000068260

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10 MAY -7 PM 12:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Colligan MAY 10 2010

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: THE NETHERLANDS, 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:

NAIRI KAZUMYAN

Name of Person

THE NETHERLANDS, LLC

Firm/Company

1330 OCEAN DRIVE 6A

Address

MIAMI BEACH, FLORIDA 33139

City/State and Zip Code

n@kazumoff.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NAIRI KAZUMYAN

Name of Person

at (**786**)

2226669

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
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**

THE NETHERLANDS, LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company were filed on 07/15/2009 and assigned
Florida document number L09000068260.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1330 OCEAN DRIVE 6A

MIAMI BEACH, FL33139

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1330 OCEAN DRIVE 6A

MIAMI BEACH, FL33139

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

NAIRI KAZUMYAN

New Registered Office Address:

1330 OCEAN DRIVE 6A

Enter Florida street address

MIAMI BEACH

City

, Florida

33139

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:

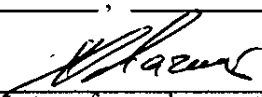
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	PRESLEY, RAY PAUL	6020 Matthew Drive Hermitage, TN 37076	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	CHUKAJIAN, ASHOT	1330 OCEAN DR 6A MIAMI BEACH FL	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	KAZUMYAN, ARSEN	1330 OCEAN DR 6A MIAMI BEACH FL	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	OUZOUNIAN, MIKE	1330 OCEAN DR 6A MIAMI BEACH FL	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Dated 05/05/2010


 Signature of a member or authorized representative of a member
 NAIRI KAZUMYAN
 Typed or printed name of signee