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C. LEWIS MAR 1 8 2010 EXAMINER

· COVER LETTER

TO:	Registration Qivision of C					
SUBJE	ECT:	MARRERO, GON	/IEZ & RAMOS, P.L	L.C.		
Name of Limited Liability Company						
		;		;		
The en	closed Articles of	of Amendment and fee(s) are sub	omitted for filing.			
Please	return all corres	pondence concerning this matter	to the following:			
			LEYLA RAMOS	<u></u>		
			Name of Person			
MARRERO RAMOS, P.L.L.C						
	Firm/Company					
6220 S. ORANGE BLOSSOM TR STE 136						
			Address			
			RLANDO, FL 32809	· ·		
		I.a.	City/State and Zip Code	•		
		E-mail address: (t	amos@mgrlawfl.com to be used for future annual repor	t notification)		
For fur	ther information	concerning this matter, please c	all:			
	LE	YLA RAMOS	at (407)	459-1226 aytime Telephone Number		
Name of Person			Area Code & D	aytime Telephone Number		
Enclose	ed is a check for	the following amount:				
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is end	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Regis Divis P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	Registration 9 Division of C Clifton Build	orporations		

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2010 MAR 17. PM & 02

MARREI	RO, GOMEZ	. & RAMOS,	P.L.L.C.	SECRETARY OF STATE
(Name of the Limite	d Liability Compa A Florida Limited	nny as it now app Liability Company	ears on our record /)	GECKETART OF SEERIORIDA
The Articles of Organization for this Limited I Florida document number	Liability Company		•	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	bility company h	<u>iere</u> :	
M	ARRERO RAI	MOS, P.L.L.C.		
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	ited Liability Con	npany," the designa	ation "LLC" or the abbreviation
Enter new principal offices address, if appli	N/A			
(Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable:		<u>N/A</u>		
(Mailing address MAY BE A POST OFFICE	E BOX)			
B. If amending the registered agent and registered agent and/or the new registered of			ı our records, <u>e</u>	enter the name of the new
Name of New Registered Agent:	N/A			
New Registered Office Address:				
		4	Enter Florida stre	eet address
			, Flori	ida
		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 = Manager MGRM = Managing Member

Signature of a member or authorized representative of a member LEYLA RAMOS	<u>Title</u>	<u>Name</u>	Address	Type of Action
Dated MARCH 16 , 2010 . Add Remove	MGRM	DENISE GOMEZ	STE 136	Add✓ Remove
Dated MARCH 16 , 2010 . Add Add Remove				
Dated MARCH 16 , 2010 . Add MARCH 16				
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated MARCH 16 , 2010 . ARR A				
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated March 16 , 2010 Hard Arch 2010 Hard 2010				
Dated MARCH 16 , 2010 TARE TARE TARE TARE TARE TARE TARE TARE				
Dated MARCH 16 , 2010 ARE ASSET TO BE LEYLA RAMOS Typed or printed name of signee	D. If amend	ling any other information, en	ter change(s) here: (Attach additional sheets, if necessa	iry.)
Dated MARCH 16 , 2010 . ARE ARE Signature of a member or authorized representative of a member TYPE STANDS Typed or printed name of signee	_			
Signature of a member or authorized representative of a member LEYLA RAMOS Typed or printed name of signee				2010 TALL
Signature of a member or authorized representative of a member LEYLA RAMOS Typed or printed name of signee	Dated	MARCH 16	2010	TILE THE TARKET
- \L == == \L ====== \ldots ====================================		Signature o		PH # 22

Page 2 of 2

Filing Fee: \$25.00