L09000075963

Division of Corporations

Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : FOWLER RODRIGUEZ VALDES-FAULI
Account Number : I20090000080
Phone : (786)364-8480
Fax Number : (305)445-3666

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: mmunoz@FRVFlaw.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

SHEMIL ENTERPRISES, LLC

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B. BOSTICK
DEC 6 2010
EXAMINER

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

SHEMIL ENTERPRISES, LLC
(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 were filed on AUGUST 7, 2009 and assigned Florida document number L09000075963.

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)

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

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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:

New Registered Office Address:

Enter Florida street address

, 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	Name	Address	Type of Action
MGR	MILAGROS. G. MILAGROS	13802 NW 11 COURT PEMBROKE PINES, FLORIDA 33028	☐ Add ☑ Remove
MGR	JOSEFINA BETANCOURT	13802 NW 11 COURT PEMBROKE PINES, FLORIDA 33028	☑ Add ☐ Remove
MGR	MILAGROS G. MUNOZ	13802 NW 11 COURT PEMBROKE PINES, FLORIDA 33028	☑ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

Dated NOVEMBER 22, 22

Signature of a member or authorized representative of a member

MILAGROS G. MUNOZ
Typed or printed name of signee

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