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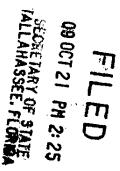
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D. BRUCE

OCT 2 2 2009

EXAMINER

## **COVER LETTER**

Division of Corporations				
SUBJECT:	Tamp	a Sales, LLC		
		ted Liability Company		
The enclosed Articles of	f Amendment and fee(s) are sub	emitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
		Daniel D. O'Malley		
		Name of Person		
		Tampa Sales, LLC		
	Firm/Company E		Es s	
	3650 Bird Road			
		Address	FILED ICT 21 PH 2: HASSEE, FLOW	
		Miami Florida 33133		
		City/State and Zip Code		
	E-mail address: (	nnyomalley@mac.com to be used for future annual report notifica	ution)	
For further information	concerning this matter, please of	all:		
Da	niel O'Malley	at ( 954 ) 6	75 8729	
Name	of Person	Area Code & Daytime	Telephone Number	
Enclosed 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 enclosed)	Sectificate of Status & Certificate Copy (additional copy is enclosed)	
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**MAILING ADDRESS:** 

TO:

'Registration Section

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 ARTICLES OF ORGANIZATION **OF**

Tampa S  (Name of the Limited Liability Comp	ales, LLC any as it now appears on our records.) Liability Company)
(A Florida Linated	Elability Company)
The Articles of Organization for this Limited Liability Compan	y were filed on September 1 2009 and assigned
Florida document numberL0900084993	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and end with the words "Lin"L.L.C."	nited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	AHA CT 7
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	97 25 97 25
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
was the factor of the second	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Ager	ıt:

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</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member Type of Action Title **Address** Name MGRM Juan Manuel Bellosta 3650 Bird Road √ Add Miami Florida 33133 Remove Daniel D O'Malley MGR 113 Nurmi Drive ✓ Add Remove Fort Lauderdale Florida 33301 ☐ Add □ Remove Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) Please change Daniel D O'Malley from managing member to Manager. Dated zed representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00