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SECRETARY OF STATE FLORID

J. BRYAN
JUN 1 8 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Shmoleys Lice 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:
Name of Person Shanoday's LLC Firm/Company 8918 Abbot Avenue Address Sufficiel Fe 33157 City/State and Zip Code Missiessureiss @ amail. Can
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person
Enclosed is a check for the following amount: \$\int_{\subset}\$25.00 \text{ Filing Fee} \$\subseteq \$\su

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

	City	_, Florida Zip Code
	Enter F10	riua sireei aaaress
New Registered Office Address:	France File	rida street address
Name of New Registered Agent:		
N CN D 1		
registered agent and/or the new registered office address he	e <u>re</u> :	
B. If amending the registered agent and/or registered of		cords, enter the name of the n
		P
(Mailing address MAY BE A POST OFFICE BOX)		
Enter new mailing address, if applicable:		20 10 D
Francisco de la constitución de		原 3
•		ASS T
(Principal office address MUST BE A STREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·	新皇 五
• •		- EE 6
Enter new principal offices address, if applicable:		
The new name must be distinguishable and end with the words "Lin "L.L.C."	nited Liability Company," the	e designation "LLC" or the appreviat
The new name must be distinguishable and end with the words "Lin		1 4 (4 1 (4 1)
A. If amending name, enter the new name of the limited lia	bility company here:	
This amendment is submitted to amend the following:		
Florida document number LOJOOO & 286		
The Articles of Organization for this Limited Liability Company	y were filed on	and assigned
The Articles of Organization for this Limited Liability Compan	8-19	r-n9
(Name of the Limited Liability Compa (A Florida Limited	<mark>any as it now appears on ou</mark> Liability Company)	<u>ir reçords,</u>)
Explainte		
Charata is	110	

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

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Type of Action** <u>Title</u> **Address** Name | 2101 S. ason Dr. Add 🔀 Remove ☐ 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,) epresentative of a member Signature of a member or author Typed or printed name of signee

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Page 2 of 2

Filing Fee: \$25.00