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EXAMINER



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COVER LETTER

то: `	Registration Section Division of Corporations
SUBJE	GCT: ADAM FERNANDEZ LLC
	Name of Limited Liability Company
ant.	
	closed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Adam fernandez
	Name of Person
	Firm/Company
	PO BOX 3136
	Address
	TAMPA FL 33601
	City/State and Zip Code 813 HOMEOPTIONS @ GMAIL . COM E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
Λc	Jam Fernandez at (727), 492 2232
	Name of Person Area Code & Daytime Telephone Number
Enclose	ed is a check for the following amount:
∏ \$25	**Solution for the state of St

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

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	Ol	F		TALLECKETAS	AM 10:07	
ADAM FER	NAND 52 Liability Compar	Z L	LC v appears on ou		OF STATE	
(<u>Name of the Limited</u> (A				,	74	
The Articles of Organization for this Limited Li Florida document number	ability Company りり4み4き	were filed	on 10/3	28/09	and assigned	
This amendment is submitted to amend the following	owing:					
A. If amending name, enter the new name of \mathcal{J}_{\bullet} $\mathcal{D}\mathcal{I}\mathcal{A}\mathcal{M}\mathcal{O}\mathcal{I}$		lity comp	any here:	,		
The new name must be distinguishable and end wit "L.L.C."	h the words "Limit	ed Liabilit	y Company," the	designation "LLC"	or the abbreviation	
Enter new principal offices address, if applicable:			1208 F. Kennedy BLUD STEH 237			
(Principal office address MUST BE A STREET ADDRESS)			1PA F	1 3300	72,	
Enter new mailing address, if applicable:		PO	BOX	313 6 L 3360)	
(Mailing address MAY BE A POST OFFICE BOX)			1PA F	<u> 3360</u>)	
B. If amending the registered agent and/oregistered agent and/or the new registered of			ess on our rec	eords, <u>enter the r</u>	name of the new	
Name of New Registered Agent:	**. ***. ******	·	·····			
New Registered Office Address:	1208	E. A	KENNES Enter Flo	Tida street address	#232	
	Thous	DA		riaa sireel aaaress		

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					
<u>Title</u>	Name Address	Type of Action			
		Add Remove			
		Add Remove			
*************************************		Add Remove			
		Add Remove			
		Add Remove			
		Add Remove			
D. If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)				
		_			
Datad	SEPTEMBER 3 2010				
Dated _	Signature of a member or authorized representative of a member	····			
	ADAM FERNANDEZ Typed or printed name of signee				

Page 2 of 2

Filing Fee: \$25.00