Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FASTKIT CORPORATE OUTFITS

Account Number : 071001002335 Phone : (305)599-0839

: (305)716-0346 Fax Number

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

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Email Address:

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C. LEWIS

DEC 8 2009

Electronic Filing Menu

Corporate Filing Menu

EXAMINER Help

FILED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

ALLSODELC

2009 DEC -7 AM 8: 44 SECRETARY OF STATE TALLAHASSEE, FLORIDA

(1)	ime of the Limited Liability Compar (A Florida Limited L	iy as (t now appears on our records.) iability Company)
	for this Limited Liability Company	were filed on NOVEMBER 06,2009 and assigned
This amendment is submitted	to amend the following:	
A. If amending name, enter	the now name of the limited lisbi	lity company here:
The new name must be distingu "L.L.C."	ishable and end with the words "Limit	ed Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices	iddress, if applicable:	
(Principal office address MU	ST BE A STREET ADDRESS!	
Enter new mailing address, Mailing address MAY BE A	., .	
3. If amending the regist registered agent and/or the i	ered agent and/or registered offi new registered office address here	ice address on our records, enter the name of the new :
Name of New Regist	cred Agent:	
New Registered Offi	ce Address:	
		Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Remistered Agent

Florida .

Zip Code

If amending the Managers or Managing Members on our records, enter the fille, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	ANNA R CARRASCO	A10 JUNG BLVD W NAPLES FL 34120	Add Remove
MGRM	MIGUEL CANCIO	4371 15TH AVE SW NAPI ES EL 34118	Add Ø Remove
			Add Remove
***			Add Remicve
			AddRemovo
			AGd Remove
Q. If amendir	ng any other information, enter cl	unge(s) here: (Attach additional sheets, if necessury.)	,
			-
			175
Dated	12/03/09	2009	TALLAHASSEE. FLORIDA
~	,	mber of authorized representative of a member RAMON CARRASCO ped or printed name of signes	SEE. FL
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