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T. HAMPTON

OCT -7 2010

EXAMINER

## **COVER LETTER**

TO:	Registration Sec Division of Corp					
SUBJ	· ECT:	La	MIA	Moda	LLC	
	•		Name of Limi	ted Liability Co	ompany	
The en	closed Articles of A	Amendment ar	nd fee(s) are sub	omitted for filin	g.	
Please	return all correspor	ndence concer	ning this matter	to the followin	g:	
		_Va	nessa	San+0	ina-Peña	+6
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			852	D JW Addre	J 146 S	+
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	. !	Va	AUJU (E-mail address: (1	City/State and  O Line  O be used for fut	Zip Code  AMODILI  ure annual report notific	Nelry. COM
For fu	ther information co	oncerning this	matter, please c	all:		.*
Va	nessa !	santar	19-Peña	He at (31	05, 215.	1753
	Name of	Person		<del></del>	Area Code & Daytime	Telephone Number
Enclos	ed is a check for the	e following ar	nount:			•
\$25	5.00 Filing Fee	\$30.00 Fi Certific	ling Fee & cate of Status	Certifie	iling Fee & d Copy nal copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registra Divisior P.O. Bo	NG ADDRES ation Section of Corporation of 6327 ssee, FL 32314	ons <sup>fue</sup>	Ĝ i	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

. La Mia	I Moda LLC	
(Name of the Limited Liab (A Flor	pility Company as it now appears of ida Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liabili Florida document number		12 D9 assured of File
This amendment is submitted to amend the following	g:	Y OF Corp
A. If amending name, enter the new name of the	limited liability company here:	STATE ORATION
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company	"the designation "LLC" or the abbreviation
Enter new principal offices address, if applicables		
(Principal office address MUST BE A STREET AL	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	2	
B. If amending the registered agent and/or registered agent and/or the new registered office :		records, enter the name of the new
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 = Mai MGRM = M	nager Ianaging Member		
Title .	<u>Name</u>	Address	Type of Action
MGR_	FRANK Penate	8520 SW 144 Jt PRIMETTO BAY, FL 3315B	Add Remove
			Add Remove
			Add Remove
<del></del>			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
_			FILE BETATE OF STATE OF CORPORATION OF CORPORATION
Dated	•	010	Texs
	Signature of a member	er or authorized representative of a member  SSU SUNTUNG - PENGTE  d or printed name of signer	

Page 2 of 2

Filing Fee: \$25.00