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G. MCLEOD

APR 27 2010

**EXAMINER** 



900177530899

04/25/10--01074--002 \*\*25.00

## **COVER LETTER**

TO:	Registration S Division of Co			•
SUBJE	CCT:	L.T. ENT	ERPRISES, LLC	
00201			ited Liability Company	
The en	closed Articles of	`Amendment and fee(s) are su	bmitted for filing.	
Please	return all corresp	ondence concerning this matte	r to the following:	
		THE	EODORE R. LUCAS, JR	
			Name of Person	
		L.1	r. enterprises, llc	
			Firm/Company	
		8950	SW 74 Court, Suite 181	3
			Address	
			Miami, FL 33156	
			City/State and Zip Code	
		TED@S E-mail address: (	LIPNSLIDERECORDS. (to be used for future annual report n	NET notification)
For fur	ther information of	concerning this matter, please	call:	•
		DRE R. LUCAS, JR	at ( 305 )	535-7595
	Name o	of Person	Area Code & Day	ytime Telephone Number
Enclose	ed is a check for t	he following amount:		
<b>₽</b> \$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	Seed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
÷	Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COU Registration Se Division of Cor Clifton Buildin 2661 Executive Tallahassee, FL	rporations g : Center Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

L.T. ENTERP	PRISES, LLC			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appear Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Company	were filed on	01/11/2010	_ and as	signed
Florida document number <u>L10000003128</u>				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company her	<u>·e</u> :		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Compa	nny," the designation "LLo	C" or the	abbreviatio
Enter new principal offices address, if applicable:	8950 SW 74	Court, Suite 1813		
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33	156	·	<u> </u>
			9	VIS
			APR	- <del>-</del>
Enter new mailing address, if applicable:	8950 SW 74	Court, Suite 1813	25	
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33	156	70	375
			_ <del></del>	
			- <del>12-</del>	27
B. If amending the registered agent and/or registered of	ffice address on o	our records, enter the	name	of the nev
registered agent and/or the new registered office address her	<u>'e</u> :			Aug.
Name of New Registered Agent:				
New Registered Office Address: 8950 SW 74	4 Court, Suite 1	813		_
	En	ter Florida street addre.	SS	
	Miami	, Florida	3315	6
	City		Zip Cod	le

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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ZAFAR, SYED HA	Miami, FL 33156	3
<del></del>			Remove
<del> </del>			<b>€</b> D
			Remove
<u> </u>			Damaus
			<u> </u>
D. If amen	ding any other information	n, enter change(s) here: (Attach additional sheets, if n	necessary.)
_			
	APRIL 22	2010	
Dated	011		
	Signati	ure of a member of authorized representative of a member	
		THEODORE R. LUCAS JR.  Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00