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(Ad	ldress)	
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(Cit	y/State/Zip/Phon	e #)
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J. BRYAN

APR 2 7 2009

EXAMINER

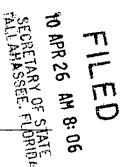
COVER LETTER

Division of Co				,
SUBJECT:	ROMY INTE	RNATIONAL 2010 , LL	• ~	
Sobole I.		ted Liability Company	,	
		•		
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	E	LEONORA TODARO		
		Name of Person		
JET SET GROUP, LLC				
Firm/Company				
	12	200 W 21ST STREET		
Address				SEC
	MIAMI	BEACH, FLORIDA 33140		APR 26 AM S CRETARY OF S LANASSEE. FI
City/State and Zip Code				R 26 RTARY
INFO@JETSETGROUPLLC.COM E-mail address: (to be used for future annual report notification)			ition)	MAR E
For further information	concerning this matter, please c		·	AH 8: 06 SEE, FLORID
ELEC	NORA TODARO	at (305) 7	983095	
Name	of Person	Area Code & Daytime	Telephone Number	
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (of Status &
	LING ADDRESS:	STREET/COURIE Registration Section	R ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



ROMY INTERNATIONAL 2010, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

			(F
The Articles of Organization for this Limited Liability Company	were filed on	01/21/2010	and assigned
Florida document numberL1000007410			
. Torrad document number			
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited liab</u>	ility company her	re:	
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	1900 N BAYSHORE DRIVE #4202		
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FLO	RIDA 33132	
Enter new mailing address, if applicable:	1900 N BAYSHORE DRIVE #4202		
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FLORIDA 33132		
			
B. If amending the registered agent and/or registered of	fice address on	our records, enter t	he name of the new
registered agent and/or the new registered office address her			
Name of New Registered Agent:			
New Registered Office Address:	Fr	nter Florida street add	ress
	Li	I for the bir out the	,
<u> </u>		, Florida	71 0 1
	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 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 **Title** Name | **Address Type of Action** MGRM **ROBERTO CALO'** 1900 N BAYSHORE DRIVE #4202 ✓ Add Remove MIAMI FLORIDA 33132 Remove ☐ Add Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) APRIL 20 Dated_ Signature of a member or authorized representative of a member **ROBERTO CALO'** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00