110000028432

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



900173088849

03/25/10--01026--011 **25.00

2010 HAR 25 AM ID 51
SECRETARY OF STATE
SECRETARY OF STATE

T. CLINE

MAR **2 6** 2010

EXAMINER

COVER LETTER

Division of Corporations Evissa6, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Paul Sartain Name of Person Evissa6, LLC Firm/Company 6705 Red Road Ste 608 Address Coral Gables, FL 33143 City/State and Zip Code Sartain@optonline.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Donald D. Wilson Jr. Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & **7**\$60.00 Filing Fee, Certified Copy Certificate of Status & Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section

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 OF

Evis	sa6, LLC		
(<u>Name of the Limited Liability Cor</u> (A Florida Limit	mpany as it now appeated Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liability Comp	oany were filed on	March 12, 201	10 and assigned
Florida document number L10000028432			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company he	ere:	
	sa6, LLC		
The new name must be distinguishable and end with the words "I" L.L.C."	Limited Liability Comp	pany," the designatio	n "LLC" or the abbreviation
Enter new principal offices address, if applicable:	•		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>		2010 SEC
		 -	CARE TO
Enter new mailing address, if applicable:			25 ARY ASSE
(Mailing address MAY BE A POST OFFICE BOX)			FFS B
			PATE S
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		our records, <u>ent</u> s	er the name of the new
Name of New Registered Agent:	····		
New Registered Office Address:			
	E	nter 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 = Manager

	<u>Name</u>	Address	Type of Action
· · · · · · · · · · · · · · · · · · ·			Add
			Remove
		,	高3
			The second of t
			EF ST
			- July Add
			Remove
			—
	·		Damaya
			Add
	•		Remove
			Damaua
If ameno	ling any other information, enter	change(s) here: (Attach additional sheet	s, if necessary.)
			<u> </u>
			
	3/22	}=/O	
	3/22 D/20	1010 . - A	·
 ed	pre	member or authorized representative of a men	nber

Page 2 of 2

Filing Fee: \$25.00