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SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SURFECT

AVER LLC

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:

# Carmen Alemany

Name of Person

**AVER LLC** 

Firm/Company

## 4905 NW 72ND AVENUE SUITE#6

Address

Miami, Florida 33166

City/State and Zip Code

## Carmen@averproductions.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

## Carmen Alemany

.305.**748-5643** 

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

■\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

#### **MAILING ADDRESS:**

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

AVER LLC
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on MARCH 17 2010 and assigned Florida document number L10000029296
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:  Enter Florida street address
Florida Florida Street address Florida
City Florida Zar-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

<u>Title</u>	Name	Address	Type of Action
MGRM	CARMEN ALEMANY	1871 nw south river dr apt 1806	Add Add
		**************************************	Remove
			Remove
<del></del>			Add
			Remove
			Add
			Remove
			Add
		-	Remove
			Add
			Remove

D. If amending any other information, ent	er change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
Cantrack at 10	0040
Dated Septmeber 12	, <u>2013</u>
Signature of	a member or authorized representative of a member
Carmen Alemany	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00