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APR 27 2010

EXAMINER

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 APR 26 AM 11:05

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L10-31145

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: West Africa Development Agency, 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:

Hernan Jasin

Name of Person

Firm/Company

14638 SW 35th Court

Address

Miramar, Florida 33027

City/State and Zip Code

hjasin@msn.com

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

For further information concerning this matter, please call:

Hernan Jasin

Name of Person

at (954)

663-9065

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

West Africa Development Agency, 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 22nd, 2010 and assigned Florida document number L0000031145.

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)

1348 Washington Avenue

Suite # 177

Miami Beach, Florida 33139

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1348 Washington Avenue

Suite # 177

Miami Beach, Florida 33139

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:

Gershon Feldfogel

New Registered Office Address:

1348 Washington Ave, Suite 177

Enter Florida street address

Miami Beach

Florida

33139

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
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Rafael Llanaez	1540 Trevino Ave Coral Gables, FL 33134	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Gershon Feldfogel	1348 Washington Ave Suite # 177 Miami Beach, FL 33139	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated April 22nd, 2010



Signature of a member or authorized representative of a member

Hernan Jasín

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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