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EXAMINER

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## **COVER LETTER**

TO: Registration Section Division of Corporation					
SUBJECT:/26_2	- D NW 15 th (Name of Lim	que LLC.  nited Liability Company)			
The enclosed Articles of An	nendment and fee(s) are sub	bmitted for filing.			
Please return all correspond	ence concerning this matter	to the following:			
	Ma	(Name of Person)	·····		
				A	<b></b>
		(Firm/Company)		C	<u>د</u>
	45.81	Nester Rd # 33	<sup>)</sup> 6	HASSI	型 T
	Vesta.,	(Address)  (Address)  (City/State and Zip Code)			
For further information cond				RIDA	ယ <i>နှ</i>
Marlon (Name of F	Chancela-	at (954) 553-357 (Area Code & Daytime T	clephone Number)		
Enclosed is a check for the t	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 Certificate of Certified Co (additional)	of Status & opy	losed)
MAILIN	G ADDRESS:	STREET/COURIER	ADDRESS:		

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Company  (Name of the Limited Liability Company)  The Articles of Organization for this Limited Liability Company		HASSEE. FLESH
Florida document number	DA N	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limi"L.L.C."		J. 22:
Enter new principal offices address, if applicable:	4581 Wester R.	+336
(Principal office address MUST BE A STREET ADDRESS)	4581 Weston &. Weston, F1 33331	
Enter new mailing address, if applicable:	45SI Weston	R1 # 336
(Mailing address MAY BE A POST OFFICE BOX)	Westen, Fl 333	,
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	fice address on our records, enter e:	the name of the new
Name of New Registered Agent:	n/A	1000
New Registered Office Address:	(Enter Florida street aa	ldress)
	·	
	, Florida	(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 Title <u>Name</u> <u>Address</u> Type of Action MARM marlon Chancelor Remove ∌Add ∏\_Remæ Adde Remide e Add Remove □ Add 🗖 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 7/23/10 Dated \_\_\_ Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00