## L10000035719

(Requestor's Name)					
(Address)					
(Ad	dress)				
(City	y/State/Zip/Phon	e #)			
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nar	те)			
(Document Number)					
Certified Copies	_ Certificate:	s of Status			
Special Instructions to Filing Officer:					
		;			
		,			

Office Use Only



100186344921

10/15/10--01020--017 \*\*60.00

10 OCT 15 AMIT: 12

T. HAMPTON

OCT 1 8 2010

EXAMNER

## **COVER LETTER**

	. 3	, -	COVEREELLER		
TO:	Registration So Division of Co				
SUBJE	ect:	QE	leven LLC		
301001	,		ted Liability Company	<del></del>	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
			Sonia E. Fraser		
			Name of Person		
			The Vini LLC		
Firm/Cor			Firm/Company		
7430 SW 142 Terrace					
Address					
Miami, FL 33158					
City/State and Zip Code					
		E-mail address: (	unbox11@gmail.com to be used for future annual report noti-	fication)	
For fur	ther information	concerning this matter, please of	call:		
		nia E. Fraser	at (_305_)	255-0117	
	Name	of Person	Area Code & Daytin	ne Telephone Number	
Enclos	ed is a check for t	the following amount:			
S25	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Regisi Divisi P.O. E	LING ADDRESS: ration Section on of Corporations Box 6327 lassee, FL 32314	STREET/COUR Registration Section Division of Corpor Clifton Building 2661 Executive C Tallahassee, FL 3	on rations enter Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Eleven LLC		<u></u>	
( <u>Name of the Limited Liability (</u> A Florida Li	Company as it now appea mited Liability Company)	rs on ou <u>r records.</u> )		
The Articles of Organization for this Limited Liability Co	mpany were filed on	April 1, 2010	and assigned	
Florida document number L10000035719	<u>.</u>			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ed liability company her	<u>re</u> :		
Th	e Vini LLC			
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liability Compa	any," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:			<u> </u>	
(Principal office address MUST BE A STREET ADDRI	ESS)		SEE SEE	
			<b>- 8</b> 祭	
			5 6 7 F	
Enter new mailing address, if applicable:			OR PE	
(Mailing address MAY BE A POST OFFICE BOX)			ST ST	
		10.		
B. If amending the registered agent and/or registe registered agent and/or the new registered office address.		our records, <u>enter t</u>	he name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter 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 MGRM = Managing Member <u>Title</u> <u>Name</u> **Address** Type of Action \_\_\_ Add Remove ☐ Add Remove  $\square$  Add Remove □Add Remove  $\square$ Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) We do not expect to be hiring employees or providing payroll until January 2011 so we wanted to amend the date for filing payroll taxes. October 7 Dated \_\_\_ 2010 Signature of a member or authorized representative of a member

> Sonia E. Fraser Typed or printed name of signee

Page 2 of 2 Filing Fee: \$25.00