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Certified Copies Certificates of Status				
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SECRETARY OF STATE
SALL AHASSEF, FLORID

J. BRYAN

JUL -1 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJE	Name of Limited Liability Company			
The end	closed Articles of Organization and fee(s) are submitted for filing.			
Please t	return all correspondence concerning this matter to the following:			
-	Christopher Curcio Name of Person			
-	Firm/Company SSE			
-	TOLL NW 11cth Court Pos = 1			
	DORAL FL 33178			
_	Chris @ doral property rentals . Com E-mail address: (to be used for future annual report notification)			
For furt	ther information concerning this matter, please call:			
	Chris Curcio at (786) 553 · 9444 Name of Person Area Code & Daytime Telephone Number			
Enclose	ed is a check for the following amount:			
\$125.00	Filing Fee \$\Bigsup \\$130.00 \text{ Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\Bigsup \\$155.00 \text{ Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)}\$\$			
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MIAMI QUALITY	DEAL ESTATE	nears on our records)	
(A Flor	ility Company as it now ap ida Limited Liability Compar	ny)	
The Articles of Organization for this Limited Liability Florida document number		05/03/2010	and assigned
This amendment is submitted to amend the following			and assigned
A. If amending name, enter the new name of the	limited liability company	<u>here</u> :	F. OF
DORAL PROPERT	Y RENTALS LL	<u></u>	6 F
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Co	mpany," the designation "Ll	C" of the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AL	DDRESS)		
	18.0°-31.31.31.31.41.41.41.41.41.41.41.41.41.41.41.41.41		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		
			
B. If amending the registered agent and/or re registered agent and/or the new registered office a		on our records, <u>enter th</u>	e 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 = Ma $MGRM = 1$	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter ch)	SECRETARY OF STATE
Dated	Christopher	Curco Deer or authorized representative of a member	
	Christoph	Programmed name of signee	

Page 2 of 2

Filing Fee: \$25.00