FROM KAIN/VA Division of Corporations

> epartment of State Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : KAIN & VALINSKY, P.A. Account Number : I20050000026 : (954)768-0678 Phone Fax Number : (954)768-0158

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FROM KAINZVA

(TUE)SEP 21 2010 15:05/ST. 15:04/No. 7539098434 P 2 **Division of Corporations** Page 2 of 2

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Corporate Filing Menu

Help

FROM KAINZVA

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ARTICLES OF AMENDMENT			- 1
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ARTICLES OF O	RGANIZAT	TION	ION CRET
. 01	OF		
			- 37r
AMAIZING IM	PORTS LLC	<u> </u>	RP RP
(Name of the Limited Liability Compar (A Florida Limited L	Liability Company as it now appears on our records.) Florida Limited Liability Company)		
(<u>-</u>	, company)		
The Articles of Organization for this Limited Liability Company	were filed on	May 13, 2010 and	d assigned
Florida document number L10000051517			. 0,
This amendment is submitted to amend the following:			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company he	re:	
		_	
The new name must be distinguishable and end with the words "Limit	d Liability Comp	any " the designation "LLC" or	the abbreviation
"L.L.C."	ca bianing comp	any, the designation DDC in	the aboreviation
Defension de la 60 de la contra de			
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			<u></u>
		·	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	* ;		
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	<u> </u>	·	
P. If amending the remintered agent and/or restatered off			
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:	ce aquiress on (our records, <u>enter the nam</u>	ic of the new
Name of New Registered Agent:			
New Registered Office Address:			
	En	ter Florida street address	
		179	
	City	, Florida Zip C	lode
	~ <u>,</u>	Zip C	-yut
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

Page 1 of 2

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If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

.

MGR = Manager MGRM = Managing Member

.

<u>Title</u>	Name	Address	Type of Action
MGRM	Daniel Dominguez	4515 Woodland Circle Tamarac, Florida_33319	Add Remove
			Add Remove
			Add Remove
			Add Remove
		· · · · · · · · · · · · · · · · · · ·	Add Remove
			Add Remove
D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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			-
Dated	September 21 , 2010	Udisky Autorized and	ettin
	Typed or	ay Valinsky printed name of signed	BIVISION OF
		Page 2 of 2 ng Fee: \$25.00	PARY DF COL
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			STATE Oratio 7:55