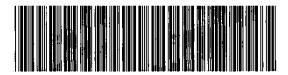
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## Craig D. Blume, P.A.

Telephone: 239-417-4848

Attorney at Law 800 Harbour Drive Naples, Florida 34103 NaplesLawOffice@Earthlink.net

Facsimile: 239-417-4840

May 25, 2010

Florida Department of State Attn: Registration Section P O Box 6327 Tallahassee, Florida 32314

Re: Florida limited liability company name changes

To Whom This May Concern:

Enclosed please find Articles of Amendment for L.F. Aviano, LLC which should be filed prior to the Articles of Amendment for Donald L. Foiani, LLC. Also enclosed are two of our firm's \$25.00 trust checks for payment of each filing.

If you should have any questions prior to filing the Amendments please contact our office. Thank you for your assistance with this matter.

Sincerely,

Craig D. Blume

CDB:jlb Enclosure

TO: Registration Sect Division of Corpo				4. • 9.	
SUBJECT:	L.F.	: AVIANO	LLC	•	· .
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The enclosed Articles of A	mendment and fee(s) are su	bmitted for fi	ling.	•	
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P.O. Box Tallahas		Clifton Buildir	ng e Center Circle		
, i ananas	,	Tallahassee, FL 32301			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

L.F. AVIANO, LLC

FILED 10 JUN -1 PM 1:5

Limited Liability Company as it now appears on our records.

(A Florida Limited Liability Company) and assigned The Articles of Organization for this Limited Liability Company were filed on \_ Florida document number \_: This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here L.D.F. HOLDINGS, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation Enter new principal offices address, if applicable: Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address 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

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Type of Action Title Title Name **Address** ☐ Add ☐ Remove ☐ Add Remove ☐ Add Remove ΠAdd Remove  $\square$ Add Remove  $\prod$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) MAY 2010 Dated Signature of a member or authorized representative of a member LUCIA FOIANI M Typed or printed name of signee Mcaber/Kgr

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Page 2 of 2

Filing Fee: \$25.00