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J. BRYAN
AUG 1 0 2010

EXAMINER

COVER LETTER

SUBJECT: THE CAY GROUP, LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: ANTHONY MANGUART Name of Person THE CAY GROUP, LLC Firm/Company 5855 Coulins ANE ART 98 Address MIAMI BEACH, FL 33140 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ANTHONY MANGUART at T86, GB3-8541 Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$\Begin{array} \text{S25.00 Filing Fee} \text{Certificate of Status} \text{Certificate of Status} \text{Certificate Copy} (additional copy is enclosed)	TO: Registration S Division of Co	ection orporations	
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: ANTHONY MANGUART Name of Person THE CAY—GRAUP LLC Firm/Company 5805 Callins ANE, ART 98 Address MIA MI BEACH, FL 33/40 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ANTHONY MANGUART Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$\Begin{array} \text{\$55.00 Filing Fee & Certificed Copy (additional copy is enclosed)} \text{ Certificed of Status & Certificed cofyy (additional copy is enclosed)} Certificed cofyy (additional copy is enclosed)	SUBJECT:	HE CAY GROUP, LLC	
Please return all correspondence concerning this matter to the following: ANTHONY MANGUART Name of Person THE CAY—GRAP LLC Firm/Company 5835 Coulins ANE ANT 98 Address MIAMI BEACH FL' 33140 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ANTHONY MANGUART Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$\Begin{array} \text{\$\frac{1}{2}\$} & \frac{1}{2}\$ &	•	Name of Limited Liability Company	
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E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ANTHONY WANSUART at (786) GP3-8541 Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$\int_{\text{\$\frac{2}{3}\$\f		MIAMI BEACH, FL 33140	21 21
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MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL-32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

THE CAY	GROUP,	LLC			•		
(Name of the Limited Lia (A Flo	bility Compar orida Limited L	ny as it nov iability Cor	v appears o	n our recor	rds.)		
•							
The Articles of Organization for this Limited Liabil		were filed	on · MA	47,0	010	and assigned	. 4
Florida document number <u>L/00000 55 8</u> .	71			1	ì		:
This amendment is submitted to amend the following	ng:		. .				
A. If amending name, enter the new name of the	<u>e limited liab</u>	ility comp	<u>anv here</u> :				
CAY-INTERNATIONA	AL, LLC	. ~ -				۔ جہ ہے	~~~
The new name must be distinguishable and end with th "L.L.C."			y. Company	," the design	nation "LLC"	or the abbrevi	ation
Enter new principal offices address, if applicable	e:						_
(Principal office address MUST BE A STREET A	DDRESS)				Pr	7. 0	
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•					AS.	5 L.	<i>-</i> -
Enter new mailing address, if applicable:				,	SEC		.) .)
(Mailing address MAY BE A POST OFFICE BO.	Y)				-		_
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B. If amending the registered agent and/or	registered of	fice addre	-66 UN UN	r records	enter the r	name of the	new
registered agent and/or the new registered office			VII VU	i records,	carter_the_r	ianic or the	IIC VV
		_			1		
Name of New Registered Agent:					•		
		- v					
New Registered Office Address:		* •	1 5 h	17121111	eet address		<u> </u>
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<u>-</u>			`	, Flor			_
		City		·	Z	ip Code	
New Registered Agent's Signature, if changing Regi	stered 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	= Man	aging Member		•		
Title '		Name		Address	;	Type of Action
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D. If am	ending	g any other information, enter ch	nange(s)	here: (Attach additional s	sheets, if necessary.) =	- 1
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Dated		AUGUST 5	2010			
•				authorized representative of a	member	<u> </u>
		ANTIK	yped or p	TANGUAYET printed name of signee		

Page 2 of 2

Filing Fee: \$25.00