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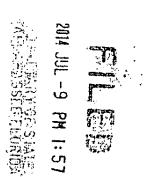
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JULO 9 2014 JULO 9 2014

COVER LETTER

Division of	Corporations			
SUBJECT:	CCD-PR-NO 1			
	Name of Lim	ited Liability Company		
The enclosed Article	es of Amendment and fee(s) are sub	mitted for filing.		
Please return all corr	respondence concerning this matter	to the following:		
	Joseph Seray			
		Name of Person		
	The Barchest	er Corporation		
		Firm/Company		
	3234 Rivervi	.ew Lane Address		
	Daytona Beac	ch, FL 32118		
	jtdm@bellsou	City/State and Zip Code		
	-	o be used for future annual report notifi	ication)	
For further informati	on concerning this matter, please ca	dl:		
Joseph S	eravalli me of Person	at (_386) 788-883		
Nü	me of reison	Area Code Daytime	Telephone Number	221
Enclosed is a check t	or the following amount:			
□ \$25.00 Filing Fe	e \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee 2	-9 PM 1:5

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

	CCD-PR-NO	•				
(Name of the Limited	Liability Company Florida Limited Liab	<u>as it now appear</u> illity Company)	s on our records.)			
The Articles of Organization for this Limited Liab Florida document numberL10000066831		ere filed on	June 23, 201	0 and a	ssigned	
This amendment is submitted to amend the follow						
A. If amending name, enter the new name of t	he limited liabilit	y company he	<u>re</u> :			
The new name must be distinguishable and end with the wo	ords "Limited Liability	Company," the c	lesignation "LLC" or th	e abbreviation	"L.L.C."	
Enter new principal offices address, if applicab	ole:	3234 Riv	verview Lane	<u> </u>		
(Principal office address MUST BE A STREET	ADDRESS)	Daytona	Beach, FL	32118		
Enter new mailing address, if applicable:	_	3234 Riv	verview Lane	2		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	Daytona	Beach, FL	32118		
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:	ee address here:	e address on Seravalli		r the name	of the no	<u>:w</u>
					I man	PERSONAL PROPERTY AND PROPERTY
New Registered Office Address:	3234 Ri	verview I Enter Flori	Jane da street address	1915 1915 1916	n Mi	73
	Daytona	Beach City	, Florida _	32118 Zin Code	PM	4
New Registered Agent's Signature, if changing Reg	istered Agent:			P.	57	
I hereby accept the appointment as registered of	agent and agree i	o act in this c	apacity. I further a	gree to com	iply with th	10

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 605. 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.

f Changing Begistered Agent, Signature of New Registered Agent

Page 1 of 3

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u> AMBR	<u>Name</u>	Address	Type of Action
MGR	Jose Valle	1553 San Ignacio Avenue	_
		Coral Gables, FL 33146	₩ Remove
AMBR	The Barchester Corp.	3234 Riverview Lane	
		Daytona Beach, FL 32118	□ Remove
MGR	Joseph Seravalli	3234 Riverview Lane	⊠ Add
		Daytona Beach, FL 32118	□ Remove
MGR	John Seravalli	3234 Riverview Lane	
		Daytona Beach, FL 32118	□ Remove
MGR	Crystal Torres	3234 Riverview Lane	20 Add J
		Daytona Beach, FL 32118	4.5
			D Remove PH : 57
			Remove

D. If ar	nend	ling any oth	ner information, ent	er change(s) here	: (Attach additional)	sheets. if necessary.)
	•		. ,			
(The e	tfectiv	e date must be	ner than the date of the specific, cannot be prior filed by the Florida Depa	to date of receipt or fil	ed date and cannot be mo	(optional) re than 90 days after
Date	ed	July 7	7	. 2014		
			Signature	of a member or autho	villi- rized representative of a r	member
			√ Josepl	h Seravalli		
				Typed or printed	d name of signee	

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Filing Fee: \$25.00

