## L10000082762

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EXAMINER

## **COVER LETTER**

10;	Division of Cor				`		
SUBJE	CT:	CIG	ITALIA, LLC				
		Name of Lim	ited Liability Company	<del></del>	•		
The end	closed Articles of	Amendment and fee(s) are sul	bmitted for filing.				
Please 1	eturn all correspo	ondence concerning this matter	r to the following:				
		Ste	wart M. Mirmelli, Esquire				
			Name of Person				
			Firm/Company				
		100 SI	E 2nd STREET, Suite 2610				
			Address		SEC	2010	
		<u> </u>	Miami, Florida 33131 City/State and Zip Code		AHASSI		
		E-mail address: (	to be used for future annual report notificat	ion)			
For further	her information c	oncerning this matter, please of	call:		STATE TLORIDA	9: 42	•
		wart Mirmelli f Person	at ( 786 ) 83  Area Code & Daytime T	37-6936 elephone Number		2	
	ed is a check for the	ne following amount:  \$30.00 Filing Fee &  Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status		
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons r Circle			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	CIG ITALI	IA, LLC			
(Name of the Limited (A	Liability Compan Florida Limited Li	y as it now appears ability Company)	on our records.		
The Articles of Organization for this Limited Li	ability Company	were filed on	08/06/2010	and ass	igned
Florida document number L10000082	2762				
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	the limited liabi	lity company here	;		
CIG A	ACQUISITIONS	S GROUP, LLC			
The new name must be distinguishable and end wit "L.L.C."	h the words "Limit	ed Liability Compar	y," the designation	"LLC" or the a	bbreviatior
Enter new principal offices address, if applic	able:	not applicable		12 N	
(Principal office address MUST BE A STREE	T ADDRESS)				19.00 1 9.00 1 9.00
			·	10.2	A Law y Thebra popularies A The   To
				SET O THE	
Enter new mailing address, if applicable:		not applicable		<u> </u>	4
(Mailing address MAY BE A POST OFFICE BOX)				9: <u>1</u>	<del></del>
				<u>6</u> m √	<del></del>
B. If amending the registered agent and/or the new registered of			ur records, <u>ente</u> s	the name o	f the new
Name of New Registered Agent:	not applicabl	е	<del>-</del>		
New Registered Office Address:	not applicabl	е			
		Ente	er Florida street a	ddress	
			, Florida _		
		City		Zip Code	1

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:

Ť

MGR = Manager

<u> Title</u>	<u>Name</u>	Address	Type of Action
<del></del>	not applicable		F Damaria
			Domasia
			AddRemove
			Remove
<del></del>	<del></del>		Add Remove
			Add Remove
	nding any other information, enter ot applicable	change(s) here: (Attach additional sheet	
_			
_			
Dated	 Mil		
		nember or authorized representative of a men	nber
		Stewart M. Mirmelli, Esq. Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00