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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

SFP - 8 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: AAA MULTIFAMILY PROFESSIONALS 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:				
Siuseppe Vi VEVAS Name of Person				
AAA MUTTIFAMILY PROFESSONALS LLC				
124194 SON Palm De				
JACKSONVILLE, FL 32225 City/State and Zip Code JOE CUEVAS 077 (D) QMAIL COM Final address: (to be used for those adjust report notification)				
JOE CUEVASO 77 (D) OMAIL COME E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
DE CUEVAS at (904 716-7115 Name of Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \$\ \text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{\$\text{Certified Copy (additional copy is enclosed)}} \text{\$\text{Certified Copy (additional copy is enclosed)}				

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

Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 Enter Florida street address City Tip 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		<u> آ</u>		
The Articles of Organization for this Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on August 9, and assigned Florida document number L 100000 830.17 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: pliA The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation and assigned to the proper or the approximation of the new registered agent and or registered agent and or recipied agent and agent and agent and agent agent and agent agent and agent agent agent agent	AAA MULTIFAMILII	RO FESSIONAL	SLLC	
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being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability	accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	orovided for in Chapter 608 address, I hereby confirm	8, F.S. Or, if this document is that the limited liability	

Page 1 of 2

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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 = Managing Member **Title** Type of Action <u>Address</u> <u>Name</u> ASSUNTA V. CUEVAS 10938 BATAVIA DR WADDAN TO REMO Remove . ☐ Add Remove Remove \square Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) I would Like ASSUPTA V. CUEVAS be Added.

Page 2 of 2

SSUNTA V. CUEVAS

Filing Fee: \$25.00

Typed or printed name of signee