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SECRETARY OF STATE
TALLAHASSEE FEBLE

COVER LETTER

Division of Corporations
isubject: Earling Brothers LLC
Subject: Earling Brothers 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: Pierre Earling Name of Person Earling Brothers LLC Firm/Company 917 North Federal Highway Address Fort Landerdale FL 33304 City/State and Zip Code Pierre Acarling brothers. Com E-mail address: (to be used for futury Amual report notification)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Pierre Earling
Name of Person
Earling Brothers LLC
917 North Federal Highway
Fort Lauderdale FL 33304 City/State and Zip Code
Pierre a carling brothers. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (954) 828 9229 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$55.00 Filing Fee & \text{Certified Copy} \text{(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	
Earling Br	tothers LLC
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our records.)
The Articles of Organization for this Limited Liability Company w	vere filed on 1116 2010 and assigned
The Articles of Organization for this Limited Liability Company we Florida document number 10000083858.	, .
This amendment is submitted to amend the following:	
_	
A. If amending name, enter the new name of the limited liabili	ty company here:
Brothers Comple The new name must be distinguishable and end with the words "Limite	te, LLC
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	AR SS
(Mailing address MAY BE A POST OFFICE BOX)	me ≥ m
	7° = 0
	72 5
B. If amending the registered agent and/or registered offic	e 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:	
Trom registered Office / reduces.	Enter Florida street address
	, Florida
	City Zin 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	_
_			- -
			_
Dated	·		
		or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00