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COVER LETTER

TO:

Registration Section Division of Corporations

SURIFCT

DIOSSY 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:

NISHAT AZAM, ESQ.

Name of Person

AZAM-SNYTKIN, PA

Firm/Company

555 WINDERLEY PLACE, SUITE 300

Address

MAITLAND, FL 32751

City/State and Zip Code

nazam@azam-snytkin.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nishat Azam, Esq.

,,407**,571-692**6

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

■\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) □\$60.00 Filing Fee, Certificate of Status & 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

DIOSSY BROTHERS, LLC		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on a Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability	Company were filed on 10/01.	/2010 and assigned
Florida document number L10000102865		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and end with the will.L.C."	ords "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg		records, enter the name of the nev
registered agent and/or the new registered office ac	idress nere:	
News (CN) - Devisered A and		
Name of New Registered Agent:		
New Registered Office Address:	Y r	
	f:nter F	lorida street address
<u> </u>		, Florida
	City	Zip 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 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 = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Member	Scott Christopher Terry	350 22nd Avenue Vero Beach, FL 32962	2 🚺 Add
			Remove
Member	Thomas Charles Harrington, Jr.	1166 6th Ave (19B) Vero Beach, FL 32960	O Add
			Remove
MGRMMember	AFP ENTERPRISES	162 ANCHOR DRIVE VERO BEACH FL 3296	3 Add
			Remove
MGRAMMEMBER	MARIA CALDARONE	3740 20TH ST., SUITE A VERO BEACH FL 32960	Add
			_ Remove
Member	LAURA CAMISA	3740 20TH ST., SUITE A VERO BEACH FL 32960	Add
			Remove
			Remove 37 FEB 2 FH Addy Remove
			Remove

D. If amending any o	other information, e	nter change(s) here: (Attack	a additional sheets, (f necessary.)
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February	11th	2013	
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		+ STUME!	105
		of a member or authorized repre	sentative of a member
ISTVA	AN DIOSSY		
		Typed or printed name of	cianno

Page 3 of 3

Filing Fee: \$25.00