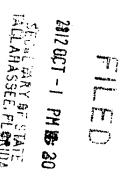
4/0000/15955

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Filotie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
A. LUNT
OCT -3 2012
EXAMINER
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10/01/12--01030--007 **25.00

FILING CANCELLED RETURNED CHECK

COVER LETTER

TO: Registration Section . Division of Corporations	
SUBJECT: TUVISINO Raly	Llc
Name of Limited Liability Compa	any
The enclosed Articles of Amendment and fee(s) are submitted for filing.	AT OCT TO THE PARTY OF THE PART
Please return all correspondence concerning this matter to the following:	SSA 1
Lance Name of Perso	Dayne BAB
TVISMO K	Realhy/LC
	n Rd # 113
Migm, 4 City/State and Zip	<u>Code</u> 33/39
E-mail address! (to be used for future a	
For further information concerning this matter, please call:	
Lance Wayne at 305. Name of Person Are	206-3/3/ ea Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Scrifficate of Status S55.00 Filing Certified Co (additional of	

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

FILING CANCELLED RETURNED CHECK

ARTICLES OF ORGANIZATION OF

	rismo Realty LLC		
(<u>Name of the Limited Liabi</u> (A Flori	ility Company as it now appea da Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability	y Company were filed on	11/05/2010	and assigned
Florida document number L10000115955	.		
This amendment is submitted to amend the following	; :		
A. If amending name, enter the new name of the l	limited liability company he	<u>re</u> :	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Comp	any," the designation TI	C" or the abbreviation
Enter new principal offices address, if applicable:		<u>ک</u>	
(Principal office address MUST BE A STREET AD	DRESS)	الله ع الله م الله ع الله ع الله ع	-2 11
Enter new mailing address, if applicable:		Ori	80
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office a		our records, <u>enter th</u>	e name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Ei	iter Florida street addr	ess
	City	, Florida	Zip Code
	Cuy		Lip Coue

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

FILING CANCELLED RETURNED CHECK

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Chavez, Johanna	255 E Flagler Miami, Fl 33131	Add Remove
<u>SEC</u>	CHAVEZ, JOHANNA	255 E FLAGLER MIAMI, fL 33131	☐ Add ☑ Remove
MGRM	CASTRO, BART	255 E FLAGLER MIAMI, FL 33131	Add Remove
MGRM	LANCE WAYNE	1521 ALTON RD #113 MIAMI, FL 33139	✓ Add ☐ Remove
<u>SEC</u>	LANCE WAYNE	1521 ALTON RD #113 MIAMI, FL 33139	AAT AAA
D. If amend	ling any other information, enter cha	ange(s) here: (Attach additional sheets, if necess	Remove (Company)
	54 15, p. 2	<u>0/2,</u> .	
	Lance	nber or authorized representative of a member Myne ped or printed name of signee	····

Page 2 of 2

Filing Fee: \$25.00