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COVER LETTER

TO: Registration So Division of Co				
SUBJECT:	A PPSUITE, L. Name of Limit	LC		
	Name of Emin	ed Enablity Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	J	UDITH DALEEN Name of Person		
		Name of Person		
	A	PSUITE, LLC Firm/Company	2013 Å	-13
		Firm/Company	3	
	2220 E. SIL	VER PALM RA Address	2013 APR -8 PH 3 30 SECRETARY OF STATE TALLAHASSEE. FLOR HO	ELL!
		Address	FEG	
	BOCA RATON	FL 33432 City/State and Zip Code	ATE PREPA	
	judydaleen B-mail address: (to	FL 33432 City/State and Zip Code Charter. net o be used for future annual report notificati	on)	
For further information of	concerning this matter, please co	all:	•	
James	Daleen	at (561) 289-4989 Area Code & Daytime Te		
Name o	of Person	Area Code & Daytime Te	lephone Number	
Enclosed is a check for t	he 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 enclose	sed)

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

	WITE, LL				
(Name of the Limited L (A F	iability Compan Iorida Limited Li	y as it now appears on our ability Company)	records.)		
The Articles of Organization for this Limited Lial	bility Company	were filed on <u>Nov.</u> 15	5,2010	and assigned	
Florida document number <u>L 10000 1187</u>	<u>64</u> .				
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited liabi	lity company here:			
			%—3 75%	. 2	<u>.</u>
The new name must be distinguishable and end with "L.L.C."	the words "Limit		AH.	A S TO	ior
Enter new principal offices address, if applical	ole:	2220 E. SILVE	ER PALES	BROW -	_
(Principal office address MUST BE A STREET	ADDRESS)	BOCA RATON	J, FL B	9/32 M	_
				Si G	_
				A 8	
Enter new mailing address, if applicable:		SAME			_
(Mailing address MAY BE A POST OFFICE B	<u>0X)</u>				_
					_
B. If amending the registered agent and/or registered agent and/or the new registered offi			ords, <u>enter ti</u>	he name of the n	ev
registered agent unity of the new registered offi	ee uuuress nere	•			
Name of New Registered Agent:	JUB	ITH DALEEN			_
New Registered Office Address:	2220 E.	SILVER PALM	RD.		
		Enter Flori	ida street addi	ress	
	BOCA RA	-ToN City	, Florida	33432. Zip Code	_
		City		Zip Code	
Nam Dagistanad Apartic Simustone is about to D					

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JAMES DALEEN	2210 E. SILVER PALM	Add
		BOCA RATON, FL 33432	Remove
<u>M G M R</u>	JUDITH DALEEN	SAME AS ABOUE	Add
			Remove
MGR_	PATRICK DALEEN	SAME AS ABOUT SEE, FLORE	Ziji Permove
-04 (p		D	
MGR.	BRANDON FORSCHINO	SAME AS ABOUE	Add Remove
			<u> </u>
MOR	GINTAKAS RACIUNAS	228 NW 2ND AVE	Add
		DELRAY BEACH, FL 33444	Remove
			Remove

,·
Dah
Signature of a member or authorized representative of a member
JUDITY DALEEN
Typed or printed name of signee

Filing Fee: \$25.00