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SELLINSSEE FLORIDA

B. BOSTICK

MAY - 3 2012

EXAMINER

COVER LETTER

TO:	Registration S Division of Co			
SUBJE	CT:	NETWORK	(S ASSETS, L.L.C.	
		Name of Lim	ited Liability Company	
The enc	losed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please n	eturn all corresp	ondence concerning this matte	r to the following:	
		Chris	stopher A. DiSchino, Esq.	
			Name of Person	
			Roca Gonzalez, P.A.	
			Firm/Company	
		2601 S	. Bayshore Drive, Suite 725	
			Address	
			Miami, FL 33133	
			City/State and Zip Code	
		<u> </u>	cdischino@rgpa.com to be used for future annual report notification)	
For furth	ner information	concerning this matter, please of		APR 39
	Christo	opher A. DiSchino	at (_305_)859-605	0 FE SVAT
		of Person	Area Code & Daytime Telephone	O FLORIES OF STATE
Enclosed	d is a check for t	the following amount:		•
\$ 25.0	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	0.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
	Regist	ING ADDRESS: ration Section	STREET/COURIER ADDR Registration Section Division of Corporations	ESS:

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NETWO	RKS ASSETS, L.L.	J			
(Name of the Limited Liabil (A Florid	ity Company as it now appea a Limited Liability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability	Company were filed on	11/22/2010	and a	assigne	d
Florida document number L10000121234	•				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lin	mited liability company her	re:			
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Compa	any," the designation "L	LC" or th	e abbrev	viatio
Enter new principal offices address, if applicable:	<u>,</u>				
(Principal office address MUST BE A STREET ADL	DRESS)		Fice	 ;	
			F76	7	
			\$ T.		****
Enter new mailing address, if applicable:			SS:-		T .
(Mailing address MAY BE A POST OFFICE BOX)					3 0
			C	- p	920q
	<u></u>		TO 11	ـــــــــــــــــــــــــــــــــــــ	
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad		our records, <u>enter th</u>	4177	of the	e nev
The second secon	<u></u>				
Name of New Registered Agent:				<u></u>	
New Registered Office Address:			77-2		
	En	iter Florida street addr	ess		
·	City	, Florida	Zip Co	de	
	" · V		•		

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>	Name	<u>Address</u>	Type of Action
MGR	KELLERT, CRISTINA	3265 MERIDIAN PARKWAY SUITE 134 WESTON FL 33331 US	☑ Add Remove
MGRM	DIAZ, ENRIQUE L.		Add Z Remove
MGR_	DIAZ, ENRIQUE L.	3265 MERIDIAN PARKWAY SUITE 134 WESTON FL 33331 US	Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter c	change(s) here: (Attach additional sheets, if necessary.	12 12
			APR 30 AB
Dated	April 20	2012	EGRILA SI-TE
	Signature of a m	ember or authorized representative of a member	
	ENF	RIQUE L. DIAZ, MANAGER	
		Typed or printed name of signee	

Page 2 of 2

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Filing Fee: \$25.00