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(Re	equestor's Name)		
(Ad	idress)		
(Ad	ddress)		
(Ci	ty/State/Zip/Phon	e #)	
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K. SALY EXAMINER DEC 1 2010

COVER LETTER

SUBJECT:		OPERTIES, LLC.	
	(Name of Lim	ited Liability Company)	
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
•	JAY PHILLIP PARKER	,	
	-	(Name of Person)	
	JAY PHILLIP PARKER,	P.A.	
,		(Firm/Company)	
	1691 MICHIGAN AVENU	JE, SUITE 320	
		(Address)	· · · · ·
	MIAMI BEACH, FL 33139	9	
		(City/State and Zip Code)	
For first or information or		-11.	
ror turmer information co	nceming this matter, please c	aii.	• • •
JAY PHILLIP PARKER		at (305) 695-2699	
(Name of	Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for the	following amount:		
2 \$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:

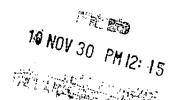
Registration Section
Division of Corporations

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



S&S1 PROPERTIES, LLC.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited	Liability Compa	any were filed on 11	/24/2010	and assigned
Florida document number L10000121802	·			-
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited l	iability company he	<u>re</u> :	
N/A .				
The new name must be distinguishable and end w'L.L.C."	ith the words "L	imited Liability Comp	any," the designation	"LLC" or the abbreviation
Enter new principal offices address, if appli	cable:	N/A		
Principal office address MUST BE A STRE	ET ADDRESS	<u> </u>		<u>.</u>
Enter new mailing address, if applicable:		N/A		
Mailing address MAY BE A POST OFFICE	E ROX)			
1774 mm g didd (1855 1777 17 17 17 17 17 17 17 17 17 17 17 1	. DO.114			
B. If amending the registered agent and registered agent and/or the new registered of			our records, <u>ente</u>	the name of the new
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
		(E	nter Florida street d	address)
			, 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 amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>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
MGRM	Shahin Afsrdeghalati		Add Remove
MGRM_	Siavash Aghaiepour		→ Add Remove
			Add Remove
;			Add Remove
			Add Remove
			Add Remove
D. If amendi 	ing any other information, ente	er change(s) here: (Attach additional sheets, if necessary.)	_
			-
			-
Dated Novem	ber 29	2010	
-	Signature of a	member or authorized representative of a member	
-		Shahin Afsrdeghalati Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00