## L10000128415

Office Use Only



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06/10/13--01023--018 \*\*25.00

FILED
SECRETARY OF STATE

## **COVER LETTER**

TO: Registration Section
Division of Corporations

485 BRICKELL AVE. # 4601, LLC

SUBJECT:

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:

ENRIQUILLO RIVAS

Name of Person

EEE INDUSTRIES, LLC

Firm/Company

5975 SW 137 TH AVE

Address

MIAMI, FL 33183

City/State and Zip Code

enriquillorivas@yahoo.com

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

For further information concerning this matter, please call:

ENRIQUILLO RIVAS

786,260 8381

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

FILED 2013 JUN 10 PM 2: 42

SECRETARY OF STATE TALLAHASSEE, FLORIDA

485 BRICKELL AVE. #4601, 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 Co	ompany were filed on	12/15/2010	and assigned
Florida document numberL10000128415	-· -·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company h	ere:	
EEE IN	DUSTRIES, LLC		
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Com	pany," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:	485 BRIC	KELL AVE. 4601 I	MIAMI, FL 33131
(Principal office address MUST BE A STREET ADDR.	ESS)		
Enter new mailing address, if applicable:	5975 SW	137 TH AVE, MIA	MI, FL 33183
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registe registered agent and/or the new registered office addr	ered office address on ess here:	our records, enter	the name of the new
Name of New Registered Agent:			
New Registered Office Address:	<u> </u>	Enter Florida street ad	dress
		. Florida	
	City	, 1 10t lua	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, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Mar MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add
		<u>.</u>	Remove
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove

` <u>N/</u>	Α	<u> </u>	
			<u> </u>
	June, 7th	2013	
-		8 Allicos	
•	Signature	of a member or authorized represen	tative of a member
		ENRIQUILLO RIVAS	
•		Typed or printed name of sign	nee
		Page 3 of 3	
		Filing Fee: \$25.00	111
			JADIR HERNANDEZ
			MY COMMISSION # EE1353

