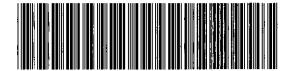
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JUL 28 2011

EXAMINER

COVER LETTER

TO:	Registration Sec Division of Corp					
SUBJE	ECT:	SPARKLE	PROPERTIES LLC			
		Name of Lim	ited Liability Company			
The end	closed Articles of A	mendment and fee(s) are su	bmitted for filing.			
Please	return all correspon	dence concerning this matte	r to the following:			
		Cł	HARMAINE JORSLING			
			Name of Person	<u> </u>		
		SPAI	RKLE PROPERTIES LLC			
		· · · · · · · · · · · · · · · · · · ·	Firm/Company			•
		4440 PG	GA BOULEVARD, SUITE 60	0		
			Address			
		DALME	EACH GARDENS, FL 33410	n		
		1 ALM D	City/State and Zip Code			
		charm	naine.jorsling@yahoo.com		7 2	
		E-mail address: (to be used for future annual report notific	eation)		
For furt	ther information con	ncerning this matter, please of	call:		2011 JUL 27 AM ID: 58 SEGRETARY OF STATE ALLAHASSEE, FLORIDA	
	CHARMA	INE JORSLING	at (561)	27-7246	27 NRY SSE	i merus
	Name of I	Person	Area Code & Daytime			
					STAI LORN	
Enclose	d is a check for the	following amount:			5 6	
₹] \$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)		of Status &	

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

SPARKLE PR (Name of the Limited Liability Comp (A Florida Limited	OPERTIES LLC pany as it now appears on our records.) I Liability Company)			
The Articles of Organization for this Limited Liability Compared Florida document numberL10000131253	ny were filed on1/1/2011	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lis	ability company here:	•		
The new name must be distinguishable and end with the words "Li.L.C."	mited Liability Company," the designation	"LLC" or the abbreviation		
Enter new principal offices address, if applicable:	4440 PGA BOULEVARD, SL	JITE 600		
(Principal office address MUST BE A STREET ADDRESS)	PALM BEACH GARDENS	781 77AL		
	FL 33410	>2		
		AS 2		
Enter new mailing address, if applicable:		SE 7		
(Mailing address MAY BE A POST OFFICE BOX)		EFFORDS		
Truming data ess harri BETTT OUT OF THEE BOTY	······································			
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		the name of the new		
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street a	ddress		
	Liner riorida sireet dadress			
	, Florida _	Zin 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, 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>	<u>Name</u>	Address	Type of Action				
MGR	A3 ENTERPRISES LLC	19946 RIVERSIDE DR JUPITER FL 33469	Add Remove				
MGR	CHARMAINE JORSLING	4440 PGA BOULEVARD, SUITE 600 PALM BEACH GARDENS FL 33410	✓ Add ☐ Remove				
MGR	NATASHA YOUNG	4440 PGA BOULEVARD, SUITE 600 PALM BEACH GARDENS FL 33410	Add Remove 				
			Add Remove				
			MI JUL 27				
D. If amendi	ng any other information, enter change((s) here: (Attach additional sheets, if necessary.)	REPONDE STATE				
			_ _				
Dated	JULY 16 , 201	1					
Signature of a member or authorized representative of a member							
AYSHE KADIR Typed or printed name of signee							
	i yped or	r printed name of signee					

Page 2 of 2

Filing Fee: \$25.00