L110000003076

(Requestor's Name)
(Address)
(Address)
(Nulless)
(City/State/Zip/Phone #)
<u></u>
PICK-UP WAIT MAIL
(Business Entity Name)
(business Littly Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200203659852

04/22/11--01022--020 **30.00



COVER LETTER

Division of Co	orporations					
SUBJECT:	LE:	OISA, LLC				
	Name of Limited Liability Company					
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.				
Please return all corresp	ondence concerning this matter	r to the following:				
		ALFREDO RECAO				
	Name of Person					
	LEOISA, LLC					
	Firm/Company					
		3939 N.W. 25TH ST				
•	Address					
		MIAMI, FL 33142				
	City/State and Zip Code					
	alfredorecao@hotmail.com E-mail address: (to be used for future annual report notification)					
For further information	concerning this matter, please of					
ALF!	REDO RECAO	at (305)	793-5715			
Name of Person		Area Code & Daytim	e Telephone Number			
Enclosed is a check for t	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:

TO:

Registration Section

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

SECRETARY OF STATE DIVISION OF CORPORATIONS
11 APR 22 PH 14 16

	LEOISA,	LLC			
(<u>Name of the Limite</u> (d Liability Company A Florida Limited Lia	as it now appear pility Company)	rs on our records.)		
The Articles of Organization for this Limited I	Liability Company w	were filed on	01/07/2011	and assigned	
Florida document number L1100000	3076				
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited liabilit	y company her	<u>'e</u> :		
	N/A				
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited	Liability Compa	my," the designation "L	LLC" or the abbreviation	
Enter new principal offices address, if appli	cable:	N/A			
(Principal office address MUST BE A STRE	ET ADDRESS)				
				-141-44-4	
Enter new mailing address, if applicable:	į	N/A			
(Mailing address MAY BE A POST OFFICE BOX)					
	-				
B. If amending the registered agent and registered agent and/or the new registered of		e address on o	our records, <u>enter t</u>	he name of the new	
Name of New Registered Agent:	HOFFMANN, PETER A.				
New Registered Office Address:					
		Enter Florida street address			
	N	<u>IIAMI</u>	, Florida	33142	
		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 698, 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>	<u>Name</u>	<u>Address</u>	Type of Action
MGRN	RAUL GARMENDIA	255 HARBOR DR. KEY BISCAYNE, FL 33149	Add Remove
<u>MGRN</u>	ADRIANA RECAO	255 HARBOR DR. KEY BISCAYNE, FL 33149	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. Ifan		ange(s) here: (Attach additional sheets, if necessary	
	BIND DE LLC COMPANY.		
	MGRM TITLE HOLDERS ARE OF	NLY AUTHORIZED TO MANAGE THE LLC	SECRETAR DIVISION OF C
Dated	APRIL 19	2011 . Alex	LEU Y OF STATE Y ORPORATIONS
		nber or authorized representative of a member ALFREDO BECAO	ON THE
	Ту	ped or printed name of signee	
		Page 2 of 2	

Filing Fee: \$25.00