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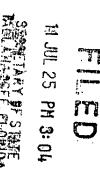
(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer: L. SELLERS						
JUL 2 6 2011						
EXAMINER						

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COVER LETTER

TO:

Registration Section

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Division of Cor					
SUBJECT:	PPD	FUND L.L.C.			
SUBJECT.		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:			
		PAVEL DMITRIYEV			
		Name of Person			
	PPD FUND L.L.C.				
	Firm/Company				
	170				
	NORTI	H MIAMI BEACH FL 33179			
	HYPN E-mail address: (NOPAVEL@GMAIL.COM to be used for future annual report notifi	cation)		
For further information co	oncerning this matter, please c	rall:			
	L DMITRIYEV	ar \ _ = = = /	213-2184		
Name of	Person	Area Code & Daytime	: Lelephone Number		
Enclosed is a check for th	e following amount:				
\$25.00 Filing Fec	\$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		STREET/COURII Registration Section			

Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	D FUNI				
(<u>Name of the Limited Liability</u> (A Florida)	y Company Limited Lia	as it now appea bility Company)	rs on our records.)		
The Articles of Organization for this Limited Liability C	Company w	ere filed on	02/04/2011	and ass	igned
Florida document number L11000014803	··				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lim	nited liabili	ty company he	<u>re</u> :		
	FUND L				
The new name must be distinguishable and end with the wor "L.L.C."	ords "Limited	d Liability Compa	any," the designation	"LLC" or the a	bbreviation
Enter new principal offices address, if applicable:					
<u>(Principal office address MUST BE A STREET ADDI</u>	RESS)				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)					
D. If any line the maid and a set of the line in	1			41	C 41
B. If amending the registered agent and/or regist registered agent and/or the new registered office add		e address on (our records, <u>enter</u>	the name o	the new
					rival and
Name of New Registered Agent:					CARACA MARKACA
New Registered Office Address:					· []
		En	ter Florida street aa	ddress in	5.000
			, Florida _		2
		City		Zi ∏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 Changing Registered Agent, Signature of New Registered Agent

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 = Manager

MGRM = Managing Member **Type of Action** <u>Title</u> <u>Name</u> **Address MGRM** BACIULYTE, DALIA 1125N VICTORIA PARK RD ✓ Add FORT LAUDERDALE FL 33304 Remove MGRM DMITRIYEV, PAVEL 1700 NE 191 STREET #404 Remove NORTH MIAMI BEACH EL 33179 ☐ Add Remove COOPER, PETER MGR 2932 NORTH ATLANTIC AVENUE ✓ Remove FORT LAUDERDALE FL 33308 □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) JULY 21 2011 Dated_ Signature of a member of a member **PAVEL DMITRIYEV** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00