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11 OCT -3 FM 4: 20

D. BRUCE

OCT 4 2011

**EXAMINER** 

## **COVER LETTER**

The enclosed Articles of Amendment and fee(s) are submitted for filling.  Please return all correspondence concerning this matter to the following:    ROLANDO HARTINEL   Name of Person   City/State and Zip Code   Address   Add	TO: Registration So Division of Co			
The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:    ROLANDO   HANTINEL     Name of Person	SUBJECT:			
Please return all correspondence concerning this matter to the following:    Rocando Hantinet   Plantinet   Planti		Name of Limi	ted Liability Company	
Firm/Company    1920 NW   3 Ave   100   10	The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Firm/Company    1920 NW 13 Ave   193172	Please return all correspo	ondence concerning this matter	to the following:	
Address  MIAMI FL 33172  City/State and Zip Code  Alexandracristina 2001 @ Yahoo. con  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  ROLANDO MANTINEL at 1822-0045  Name of Person  Area Code & Daytime Telephone Number  Englosed is a check for the following amount:  \$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)  Certified Copy  (additional copy is enclosed)		ROLANDO		Z = 11 OCT
Address  MIAMI FL 33172  City/State and Zip Code  Alexandracristina 2001 @ Yahoo. con  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  ROLANDO MANTINEL at 1822-0045  Name of Person  Area Code & Daytime Telephone Number  Englosed is a check for the following amount:  \$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)  Certified Copy  (additional copy is enclosed)			Firm/Company	SSE SSE
City/State and Zip Code  Alexandracvistina 2001 @ Yahoo. com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  ROLANDO MANTINEZ at (786, 222-0045  Name of Person Area Code & Daytime Telephone Number  Englosed is a check for the following amount:  \$25.00 Filing Fee \$\bigcup \$30.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy		1920	NW 82 A	VE FISH I
Alexandracvistina 2001 @ Yahoo. Con  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:    Rolando   Mantinez   186 222-0045     Name of Person   Area Code & Daytime Telephone Number		Miami	FL 3	317 <u>3</u>
For further information concerning this matter, please call:    ROLANDO   MANTINEZ   186 222-0045     Name of Person   Area Code & Daytime Telephone Number		alexandr E-mail address: (	City/State and Zip Code  CCV15 + Ina 20  to be used for future annual report notifical	oj@yahoo.com
Name of Person  Area Code & Daytime Telephone Number  Englosed is a check for the following amount:  \$25.00 Filing Fee \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	For further information of			
Name of Person  Area Code & Daytime Telephone Number  Englosed is a check for the following amount:  \$25.00 Filing Fee \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ROLAN	DO MARTIN	EZ at 786, 222-6	0045
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Certificate of Status Certified Copy Certificate of Status & Cadditional copy is enclosed) Certified Copy	Englosed is a check for t	he following amount:		
	\$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

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

(Name of the Limited (A	RADING	LLC	
(Name of the Limited (A	Liability Company as it nov Florida Limited Liability Cor	npany)	
The Articles of Organization for this Limited Lize Florida document number \(\begin{align*} \blue{\psi} & \p	ability Company were filed	on <u>2/18/20</u>	// and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liability comp	any here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability	/ Company," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	(ADDRESS)		<u> </u>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B  B. If amending the registered agent and/or the new registered office of the new registered o	r registered office addre		
Name of New Registered Agent:  New Registered Office Address:	ROLAND 1920 NO HIAMI	O MANTIN  1 82 AVE  Enter Florida street add , Florida	EZ dress 33126
New Registered Agent's Signature, if changing Ro			Zip Code
hereby accept the appointment as registered	<del></del>	n this capacity. I further as	ree 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, Ingreby/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>	Address	Type of Action
HGR	ALEXANDRA C.	9621 FONTAINE bles	AN BOW Add Remove
MGR	ROLANDO	1920 NW 82 AVE MIAMI, FC 3316	Add  Remove
			Add Remove
			Add Remove
			AddRemove
			Add Remove
D. If amer	nding any other information, enter chan	ge(s) here: (Attach additional sheets, if neo	cessary.)  ACC HANNER ASSET
	2/20 0 1	\$ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	PESTITE FLORITE
Dated/	(18)	r or authorized representative of a member	
	KOLANDO	MANTINEZ.  I or printed name of signee	
	1 1 1 1 1 1	h rientie or arBitee	

Page 2 of 2

Filing Fee: \$25.00