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2011 JUL 28 AM Nº 04.
SECRETARY OF STATE
ASSETS FI ORIO

C. LEWIS

JUL 2 9 2011

EXAMINER

COVER LETTER

TO:	Registration S Division of Co				
SUBJE	. w. di CT:	THE MOUN	ITAIN ROSES LLC	;	
SUBJE	<u></u>		ited Liability Company		
		f Amendment and fee(s) are suit	_		
			LAURA E. VIEIRA Name of Person		
THE			MOUNTAIN ROSES I	LLC	
			Firm/Company	·	
		92	SW 3rd Street Ste 31	1	
			Address		
			MIAMI, FL 33130		
		laura E-mail address: (City/State and Zip Code @themountainroses.ct to be used for future annual reports.	om	on)
For furt	her information	concerning this matter, please of	•		··· <i>,</i>
	La	aura E. Vieira	at (305)		34413
Name of Person			Area Code &	Daytime Tele	ephone Number
Enclose	ed 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 er	nclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS:		STREET/C	OURIER A	ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2011 JUL 28 AM W 01

THE (<u>Name of the Limited</u> (A	MOUNTAL Liability Compa Florida Limited I	N ROSES LLC inv as it now appears of Liability Company)	SECR n our records) (A	ETARY OF STATE HASSEE. FLORIDA			
The Articles of Organization for this Limited Lia Florida document number		were filed on <u>Fel</u>	oruary 21, 2011	and assigned			
This amendment is submitted to amend the follo A. If amending name, enter the new name of	J	oility company here:					
The new name must be distinguishable and end with "L.L.C."	the words "Lim	ited Liability Company,	" the designation "l	.LC" or the abbreviation			
Enter new principal offices address, if applica	92 SW 3rd Street Ste 311						
(Principal office address MUST BE A STREE)	Miami, FL 33130						
Enter new mailing address, if applicable:	92 SW 3rd Street Ste						
(Mailing address MAY BE A POST OFFICE E	Miami, FL 33130						
B. If amending the registered agent and/oregistered agent and/or the new registered off Name of New Registered Agent:			records, enter t	he name of the new			
New Registered Office Address:	New Registered Office Address: 92 SW 3rd Street Ste 311						
	Enter	Enter Florida street address					
		Miami	, Florida	33130			
		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 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 = Ma MGRM = N	nager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
, , , , , , , , , , , , , , , , , , , 			Add Remove
yl-13			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessa	ry.)
			2011 JUL 2
Dated	Signature of a member	Desoluel of a member	2011 JUL 28 MI W. O.I. SECRETARY OF STATE ALLAHASSEE. FLORID
	LAURA E. VIEI	r or authorized representative of a member / R /4- or printed name of signee	₹
	ryped	L	

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Filing Fee: \$25.00