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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305) 633-9696

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COMPRO GROUP LLC

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PAGE 01/03

EMPIRE CORP KIT

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	COMPRO G	ROUP LLC			
(Na	me of the Limited Liability Compa (A Florida Limited I	ny as it now appea	irs on our records.)	•	
	(11110000		•	对 <sub>6</sub> 。≌	
The Articles of Organization	for this Limited Liability Company	were filed on	03/08/2011	sad assigned	
Florida document number	L11000028441			经后	
				S 72	
This amendment is submitted	to amend the following:			MO P	
		Ibda		FS	
A. If amending name, enter	the new name of the limited liab	ility company he	TA:	PE. FLORID	
The new name must be disting: "L.L.C."	sishable and end with the words "Lim	ited Liability Comp	sany," the designation "L	LC" or the abbreviation	
Enter new principal offices	address, if applicable:				
(Principal office address MUST BE A STREET ADDRE		3330 NE 190TH STREET APT 718			
		AVENTURA	FL 33180		
Enter new mailing address,	if applicable:	3330 NE 19	OTH STREET APT	718	
(Mailing address MAY BE A	POST OFFICE BOXO	<b>AVENTURA</b>	FL 33180		
	tered agent and/or registered o		our records, enter t	he name of the new	
Lesimored agent and/or the	new registered office address her	<u>re:</u>			
Name of Name Danie					
Name of New Regis	RIOTOL ARBIT:				
New Registered Of	fice Address:				
		E	nter Florida street add	ress	
			, Florida		
		City		Zip Code	
57 75 1 4 4 4 19					

New Registered Agent's Signature, if changing Registered Agents

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

Page 1 of 2

H11000202813

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## H11000202813

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Membar being added or removed from our records:

itle	Name	Address	Type of Action
<u>IGRM</u>	LEVY, CLAUDE	1047 NANDINA DRIVE WESTON FL 33327	Add    Remove
			Add Remove
·····			Add Remove
<del></del>			Add Remove
			Add Remove
minimization de la Company			Add
Ifamen	ding any other information, enter	change(s) here: (Attach additional sheets, if nece	
_			2011 AUG 12 AM 10: 41 SEGRETARY OF STATE TALLAHASSEE, FLORID
<b></b> .	AUG 12	2011	AN ID: 4
ated	Signature of	Approper or authorized representative of a member	DI -
		ISACCO BERAHA Typed or printed name of signee	
		Page 2 of 2	

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MGR - Manager