## L11000034736

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SECRETARY OF STATE
SOLVISION OF CORPORATIONS

N. Culligan APR 25 2011

## **COVER LETTER**

TO: Registration Division of C	Section Corporations			
SUBJECT:	Biscayne	Commerce, LLC		
	Name of Lim	ited Liability Company		
	of Amendment and fee(s) are sul			
	Lynn C. Washington			
Name of Person				
Washington & Associates, P.A.				
	Firm/Company			
	3301	NE 1st Ave, Suite M-501	•	
		Address		
	1	Miami, Florida 33137		
		City/State and Zip Code		
lwas		hington@walaw.us.com to be used for future annual report notifica	tion)	
For further information	n concerning this matter, please of			
Lyn	ın C. Washington	at ( 305 ) 57	73-2929	
Nam	e of Person	Area Code & Daytime T	clephone Number	
Enclosed is a check fo	r the following amount:			
<b> </b>	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	ILING ADDRESS: istration Section	STREET/COURIER Registration Section	R ADDRESS:	

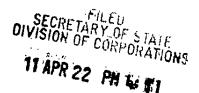
Division of Corporations P.O. Box 6327

TO:

Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Name of the Limited Liebi	ne Commerce, LLC	)	
(A Florid	ity Company as it now appe la Limited Liability Company	nrs on our records.)	
The Articles of Organization for this Limited Liability	Company were filed on	March 22, 2011 and assigned	
Florida document numberL11000034736	·		
This amendment is submitted to amend the following:	:		
A. If amending name, enter the new name of the li	mited liability company ho	ere:	
Biscayno	e Eco Commerce, LLC		
The new name must be distinguishable and end with the v "L.L.C."	vords "Limited Liability Comp	pany," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADI	DRESS)		
	——		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	istered office address on ldress here:	our records, enter the name of the ne	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		, Florida	
	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 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 = Ma MGRM = 1	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			□ Damava
			□ Damaua
			□ D amazua
D. If amen	ding any other informatio	n, enter change(s) here: (Attach additional sheet	s, if necessary.)
_			SECRETAR IVISION OF C
	April 20	. 2011 .	CORPORALI
Dated	77piii 20	200000000000000000000000000000000000000	TIONS
	Sign	ure of a member or authorized representative of a men	nber
		Lynn C. Washington, Esq.  Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00