L11000035111

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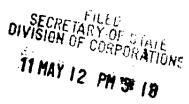
TO:	Registration Section Division of Corpora	tions	en e		
SUBJI	FCT:	EN	REL LLC		
oc be.		Name of Limit	ted Liability Company		
The en	iclosed Articles of Amer	ndment and fee(s) are sub	mitted for filing.		
Please	return all correspondence	ce concerning this matter	to the following:		
	_		ENRICO BAGDADI	- -	
			Name of Person		
ENREL LLC					
			Firm/Company		
	527 HOLIDAY DRIVE				
Address					
HALLANDALE BEACH, FL 33009					
			City/State and Zip Code		
		R-mail address: (t	bnathan@gmail.com o be used for future annual report notifi	cation)	
For fur	ther information concer	ning this matter, please c		cuiton)	
	ENRICO	BAGDADI	at (954) Area Code & Daytimo	296-6741	
•	Name of Perso	on	Area Code & Daytime	e Telephone Number	
Enclos	ed is a check for the foll	owing amount:			
\$25	5.00 Filing Fee	\$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 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 OF



·	ENREL LLC		•		
(<u>Name of the Limited Liabi</u> (A Floric	lity Company as it now appea la Limited Liability Company)	rs on our records.)	<u> </u>		
(**************************************	a same sacrity company)	1			
The Articles of Organization for this Limited Liability	Company were filed on	03/23/2011	and assigned		
Florida document number L11000035111					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the li	mited liability company he	<u>re</u> :			
The new name must be distinguishable and end with the v "L.L.C."	vords "Limited Liability Compa	any," the designation "L	LC" or the abbreviation		
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADD	DRESS)				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)					
		,	<u>.</u>		
B. If amending the registered agent and/or reg	istered office address on o	our records, enter th	ne name of the new		
registered agent and/or the new registered office ad		,			
Name of New Registered Agent:	<u> </u>				
New Registered Office Address:					
TO TOBIOTES OFFICE FEMALOS.	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

is 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 **Type of Action Address** Title <u>Name</u> ELIDA M. BAGDADI Mrs. **527 HOLIDAY DRIVE** ☐ Add HALLANDALBEACH, FL 33009 Remove ☐ Add Remove ☐ Add ☐ Remove Remove ___Add _ Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) May 7th, 2011 Signature of a member or authorized representative of a member **ENRICO BAGDADI** Typed or printed name of signee

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Filing Fee: \$25.00