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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : J. E. HOFMANN & ASSOCIATES, P.A.
Account Number : 119990000022
Phone : (305) 666-0024
Fax Number : (305) 666-0028

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

Email Address: cindy@jhlhcapa.com

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LAR PHOTO, LLC

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Corporate Filing Menu

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<https://efile.sunbiz.org/scripts/efilcovr.exe>

2/28/2013

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

LAR PHOTO, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on April 13, 2011 and assigned
Florida document number L11000044101.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

1550 NE MIAMI GARDENS DR STE 300

MIAMI, FL 33179-4836

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

1550 NE MIAMI GARDENS DR STE 300

MIAMI, FL 33179-4836

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida

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

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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>	<u>Address</u>	<u>Type of Action</u>
MGRM	Progresso DF, LLC	2125 NW 86 Avenue	☐ Add
		Doral, FL 33122	☒ Remove
MGR	Jose Roberto Vernin	284 RUA AGATA	☐ Add
		JARDIM DOS CAMARGOS	☒ Remove
		BARUERI, SP 06410-210 BR	
MGRM	Dalta, LLC	420 S DIXIE HWY STE 4B	☒ Add
		CORAL GABLES, FL 33146 US	☐ Remove
MGR	Jack Strimber	1578 NE 194TH ST	☒ Add
		MIAMI, FL 33179 US	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated February 28, 2013

Signature of member or authorized representative of a member

Jack Strimber

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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