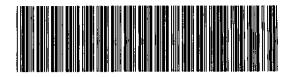
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DEC 28 2011

COVER LETTER

TO: Registration S Division of Co	Section orporations	·	
SUBJECT:	SUBU FOC	D SERVICES LLC	
		ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		ARIF TUKSAL	
		Name of Person	
	ZOLI DEC 27		
	\$ A A		
	М	AMI BEACH FL 33140	1190
	OF THE STATE OF		
	TATE &		
	E-mail address: (@meatballsandetc.com to be used for future annual report notification	on)
For further information	concerning this matter, please of	all:	
	Arif Tuksal	at (= = =)	64420
Name	of Person	Area Code & Daytime Tel	ephone Number
Enclosed 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 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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUB (<u>Name of the Limited I</u> (A		ERVICES LLC ny as it now appears Liability Company)	on our records.)		-	
The Articles of Organization for this Limited Lia Florida document numberL11000046	were filed on	04/20/2011	and assigned			
This amendment is submitted to amend the follow	wing:					
A. If amending name, enter the new name of	the limited liab	ility company here:				
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ited Liability Company	," the designation "l	LLC" or th	ne abbrev	——– viatio
Enter new principal offices address, if applica	ble:	6175 NW 167S	T STREET			
(Principal office address MUST BE A STREET		UNIT G-23 MIA	MI FL 33015	75	EC 2	Ĭ.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	(OX)			RY OF STATE	7 PH 1: 81	Part of the state
B. If amending the registered agent and/or the new registered offi	r registered of		r records, enter 1	the name	of the	 : new
Name of New Registered Agent:	GULDEM KURTOGLU					
New Registered Office Address:	6175 NW 167ST STREET UNIT G23 Enter Florida street address					
	MIAMI , Florida		, Florida	33015		
		City		Zip Co	ode	

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

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** Title Name Address MGRM AHMET KARACA 1500 BAY ROAD UNIT 766 ☐ Add MIAMI BEACH FL 33139 Remove GULDEM KURTOGLU MGR 6175 NW 167 ST UNIT G-23 ✓ Add MIAMLEL 33015 Remove ☐ Add □ Remove lÄdd Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) AHMET KARACA OWNED % 4 GULDEM KURTOGLU OWNED %96 11-22 2011 Dated ____ Signature of a member or authorized representative of a member AHMET KARACA Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00