L11000053583

Office Use Only



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COVER LETTER

TO: Registration S Division of Co	ection , , , reportations		
Encore	Imports, LLC		
SUBJECT:	Name of Limi	ted Luability Company	angapatan B. B. ay again a space against a spa
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Elizabeth M. Queveo	do	
		Name of Person	·
	Encore Imports, LLC)	
		Firm/Company	
	7238 N.W. 25th Stre	et	
	Toping the Anthony (State) That A State Of the State Of	Address	
	Miami, Florida 3312		
	encoreimports@yah		
		o be used for future annual report notificat	ion)
	concerning this matter, please c		
Elizabeth M. Quev	redo 	786 514-2013	
Name (of Person	al ()	dephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$\$5.00 Filing Fee & Certified Copy (additional copy is enclosed)	C1\$60.09 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
Fullahassee, F1, 32301

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

Encore Imports, LLC

company has been notified in writing of this change.

(<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)			
The Articles of Organization for this Limited Liability Company were filed on	_ and assigned		
Florida document number L11000053583	<u>65</u>	72 12 to 13 to	
This amendment is submitted to amend the following:	FEB 28		
A. If amending name, enter the new name of the limited liability company here:	****		
Encore Group, LLC.	e 4 mar 9 marron marron		
The new name must be distinguishable and end with the words "I imited Liability Company," the designation "LLC "L.L.C."	or the	abbreviatio	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office address on our records, enter the registered agent and/or the new registered office address here:	name (of the nev	
Name of New Registered Agent:			
New Registered Office Address:			
Enter Florida street address	Enter Florida street address		
- Florida Florida			
Cife 2	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 the provisions of all statutes relative to the proper and complete performance of my duties, and I am facept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if the being filed to merely rather a chapter in the majoral of the second of the provided for the chapter form.	C		

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

If amending the Managers or Managin, Members on our records, enter the title, ...me, and address of each Manager or Managing Member being added or removed from our records:

MGR = Mana MGRM = Ma	ager inaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
· ·			Remove
			Kemive
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			Add
,			Remove
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			Add
			Remove
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			CO Control (Add)
			D Parison
			Remove
7		. 44.00-4 / 19.00-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-	Add
		- 1- 1	Remove
		An analysis of the state of the	
			Remove

If	amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	February, 26th 2013
ed	- 1 Obridary, 2011
	Signature of a member or authorized representative of a member
	Elizabeth M. Quevedo
	Typed or printed name of signee

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Filing Fee: \$25.00

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