

L11000053923

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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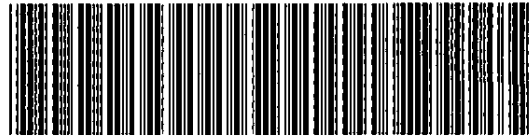
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

SEP 21 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

CUMMA ALLIAN
EIN: 36-4698
DOC #: L110001

SUBJECT: CUMMA ALLIANCE LLC.
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RAFAEL A. MALDONADO

Name of Person

CUMMA ALLIANCE LLC.

Firm/Company

1020 NW 62nd ST. HANGAR #9

Address

FT. LAUDERDALE, FL 33309

City/State and Zip Code

R: MALDONADO@CUMMAALLIANCE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAFAEL MALDONADO

Name of Person

at (954) 394 9826

Area Code & Daytime Telephone 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 /
Certificate of
Certified Copy
(additional)

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CUMMA ALLIANCE LLC.

EIN: 36-4698432

DOC #: L11000053923

CUMMA ALLIANCE 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 MAY 06, 2011 and assigned
Florida document number L11000053923

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1020 NW 62nd ST HANGAR #9
FT. LAUDERDALE, FL 33309

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1020 NW 62nd ST HANGAR #9
FT. LAUDERDALE, FL 33309

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:

SAME

New Registered Office Address:

1020 NW 62nd ST HANGAR #9

Enter Florida street address

FT LAUDERDALE

Florida

33309

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 = Manager

MGRM = Managing Member

CUMMA ALLIANCE LLC.

EIN: 36-4698432

DOC #: L11000053923

Title Name Address if Action

P FRANKLIN CUMARINA 743 N POWERLINE RD. ☒ Add
POMPANO BEACH, FL 33069 ☐ Remove

VP RAFAEL MALDONADO 610 HIGH POINT BLVD N, APT D ☒ Add
DELRAY BEACH, FL 33445 ☐ Remove

Tre RICHARD CACERES 1020 NW 62nd ST, Hangar 9 ☒ Add
FT. LAUDERDALE, FL 33309 ☐ Remove

SAC ELIO PEREZ 1020 NW 62nd ST Hangar 9 ☒ Add
FT. LAUDERDALE, FL 33309. ☐ Remove

☐ Add
☐ Remove

☐ Add
☐ Remove

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

TAX ID # 36-4698432

11 SEP 20 AM 00
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated September 15, 2011

Signature of a member or authorized representative of a member

RAFAEL MALDONADO.

Typed or printed name of signee