411000068369

(Requestor's Name)				
(Add	dress)			
(Add	dress)			
(City	y/State/Zip/Phone	e #)		
PICK-UP	MAIT WAIT	MAIL		
(Business Entity Name)				
(Do	cument Number)			
Certified Copies	_ Certificates	of Status		
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12 MAY 14 AH 11: 50

SECRETARY OF STATE DIVISION OF CORPORATIONS

MAY 1 5 2012 T. HAMPTON

COVER LETTER

Division of Co	rporations		
SUBJECT:	Bro	omley, LLC	
30 2 000		ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sul	bmitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
		Luis Diaz	
		Name of Person	
		Firm/Company	
	2173 Re	nassence Boulevard Apt. 1	03
		Address	
	M	liramar, Florida 33025	
		City/State and Zip Code	
	the mail address /	libisd@yahoo.com to be used for future annual report notif	Tanking)
			ication)
For further information of	concerning this matter, please of	call:	
	Shari Stier	at (954)	649-0998
Name o	of Person	Area Code & Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	Sectificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

12 MAY 14 AM 11:50

	Bromley, LLC		
(Name of the Limite	d Liability Company as it now appea A Florida Limited Liability Company)	ars on our records.)	
The Articles of Organization for this Limited I	Liability Company were filed on	June 10, 2011	and assigned
Florida document number L1100006	88369		
This amendment is submitted to amend the fol	llowing:		
A. If amending name, <u>enter the new name</u>	of the limited liability company he	ere:	
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Comp	pany," the designation "L	.LC" or the abbreviation
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	E BOX)		
			
B. If amending the registered agent and registered agent and/or the new registered or	U	our records, enter t	he name of the new
Name of New Registered Agent:	Luis Diaz		
	2173 Renassence Boulev	ard Apt 103	
New Registered Office Address:		nter Florida street add	ress
	Miramar	, Florida	33025
	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. In 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, thereby 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

<u>Title</u> <u>Name</u>

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRN	M Luis Diaz	2173 Renassence Boulevard Apt 103 Miramar, Florida, 33025	Add Remove
MGR	Juan C. Gomez	14200 SW 23 Street Davie, Florida, 33225	Add ☑ Remove
	_		Add Remove
			Add Remove
	***************************************		Add Remove
			Add Remove
D. If ar	mending any other information	enter change(s) here: (Attach additional sheets, if necessary.)	SECRETARY DIVISION OF C
			LED SIATE SO AMILESO
Dated _	May 10		
	Signatu	re of a member or authorized representative of a member	
	<u></u>	Luis Diaz Typed or printed name of signee	
		i yped of printed name of stynee	

Page 2 of 2

Filing Fee: \$25.00