1000086574

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EXAMINER



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08/12/2011

NAME:

RAIRE PRIVATE EQUITY, LLC

TYPE OF FILING: ARTICLES OF AMENDMENT

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AUTHORIZATION: ABBIE/PAUL HO

COVER LETTER

10: Registration Section of Corporation of Corporation of Corporation of Corporation (Corporation Corporation Corp			nos
subject: <u>Rai</u> R	e Private Ea	ed Liability Company	11 Als 12 Page
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	No.
Please return all correspond	dence concerning this matter	to the following:	
	Renato I	regui	
	Raire P		, LLC
	<u>l610</u> (0	ral Ridge Dr.	
	Fr. Cau	derdale, FL:	33305
	Witch	City/State and Zip Code Cass Dawa Cass o be used for future Ennual report notifical	
For further information con	cerning this matter, please c	all:	
Witche	11 cass	at (954), 224 31	11
Name of P	Person	Area Code & Daytime T	elephone 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

ARTICLES OF AMENDMENT

TO '	A COMMENT
ARTICLES OF OF	RGANIZATION
OF	
(Name of the Limited Liability Company (A Florida Limited Liability Company)	as it now appears on our pecords.)
The Articles of Organization for this Limited Liability Company v Florida document numberL10000 86574	vere filed on 728/2011 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	ty company here:
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company," the designation "LLC" or the abbreviation
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 here:	e address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida

Zip Code

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 = Ma	anaging Member		
<u>Title</u>	Name	Address	Type of Action
MEEM	MPK Investment Group, I	inc. 1610 Corol Ridge DV.	Add Remove
MGEM	Renato Irequi		☐ Add ☑ Remove
MGCM	RENATO ARISTIZABA	L-IREGUI	_⊠ Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendia	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
-			-
	august 2011		_
Dated 775	Alu	Authorized representative of a member	
	' //	printed name of signee Page 2 of 2	
	•	rage 2 01 2	

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Filing Fee: \$25.00