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11 OCT -6 PH EX 35

D. BRUCE

OCT 7 2011

EXAMINER

COVER LETTER

TO: Registration S Division of Co	Section orporations				
SUBJECT:	THE LAJ	GARAGE, LLC			
		Name of Limited Liability Company			
The enclosed Articles o	of Amendment and fee(s) are sul	bmitted for filing.			
Please return all corresp	oondence concerning this matter	r to the following:			
		JOVEL, LENIN A Name of Person			
	T	HE LAJ GARAGE, LLC Firm/Company	· · · · · · · · · · · · · · · · · · ·		
	Miami, FL 33127 City/State and Zip Code				
	E-mail address: (niamigarage@gmail.com to be used for future annual report noti	ication)	T-6 P	
For further information	concerning this matter, please of	call:		OF STA	
	ovel, Lenin A of Person	at (<u>305</u>) Area Code & Daytin	469 2881 ne Telephone Numbe	SE S	
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	l) Certified	ite of Status &	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COURI Registration Section Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

— The <u>(Name of the Limited L</u> (A F	IE LAJ GA iability Compa Torida Limited I	RAGE, LLC ny as it now appear liability Company)	s on our records.)		
The Articles of Organization for this Limited Lial Florida document number	pility Company				igned	
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of t	he limited liab	ility company her	<u>e</u> :			
		RAGE, LLC				
The new name must be distinguishable and end with "L.L.C." Enter new principal offices address, if applical		ited Liability Compa		on %LLC" or the a	abbreviation	
(Principal office address MUST BE A STREET		Miami, FL 331		958	<u>.</u>	
Enter new mailing address, if applicable:		1141 NW 36th	Street	PH 24 35 OF STATE E. FLORIDA	* * V	
(Mailing address MAY BE A POST OFFICE BOX)		Miami, FL 331	27			
B. If amending the registered agent and/or registered agent and/or the new registered office	ce address her	<u>e</u> :	ur records, <u>ent</u>	er the name o	f the new	
Name of New Registered Agent:	Jovel, Lenin A					
New Registered Office Address:	<u>1141 NW 36</u>		er Florida street	address		
		<u>Miami</u>	, Florida	33127		
		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 **Type of Action** <u>Title</u> Name 1 Address 1141 NW 36th Street **MGRM** Jovel, Lenin A Miami, FL 33127 Remove (note: address changed) ☐ Add Remove ☐ Add ☐ Remove Remove ∏Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Miami, October 3, 2011. Signature of a member or authorized representative of a member

Jovel, Lenin A
Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00