#1/1000/14250

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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT

RODESKAS 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:

Julieta Suarez-Rangel

Name of Person

Rodeskas LLC

Firm/Company

1902 Honour Rd Apt. 5

Address

Orlando, FL 32839

City/State and Zip Code

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

For further information concerning this matter, please call:

Julieta Suarez-Rangel

321_{at}(321)697-2285

Name of Person

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 Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

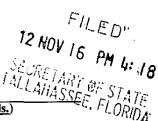
MAILING ADDRESS:

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 ARTICLES OF ORGANIZATION OF



RODESKAS 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 Lia Florida document number L11000114250	ability Company were filed on Octobe	er 5, 2011 and assigned
This amendment is submitted to amend the follo	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applica	ble:	
(Principal office address MUST BE A STREET	(ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE E	<u></u>	
B. If amending the registered agent and/o registered agent and/or the new registered off		ecords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter F	lorida street address
		, Florida
	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 Mahagers 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

Title	Name	Address	Type of Action
MGRM	Rodrigo Bravo	1902 Honour Rd Apt. 5	Add
		Orlando, FL 32839	Remove
			_
			Add
			Remove
			Add
			Remove
			Add
			Remove
			-
			Add
			Remove
			-
		<u> </u>	Add
			Remove

D. If amending a	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
 -	
Na	-h10 h C 2010
Dated Noven	nber 12 2012
	\times \bigvee
	Signature of a member or authorized representative of a member
Ju	lieta Suarez-Rangel
	Typed or printed name of signee
	Page 3 of 3
	Filing Fee: \$25.00