L11000128531

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B. BOSTICK

JUN 11 2012

EXAMINER

COVER LETTER

TO:	Registration Sect Division of Corpo		· •	. *	f u			
SUBJI	ECT:	FIVE M	ONKEYS LL	С				
50 2 0		Name of Lim	ited Liability Compa	ıny		_		
The en	closed Articles of Ar	nendment and fee(s) are sul	omitted for filing.					
Please	return all correspond	lence concerning this matter	to the following:					
			CRAIG SCHN					
			Name of Perso	n				
		F	IVE MONKEYS			 _		
			Firm/Company	1				
		1	1548 NW 49 C	OURT				
			Address					
	•	CORAL S	PRINGS FLO	ORIDA 3	3076		12	
			City/State and Zip				12 JUN -8	ي نا تي نا
		C	RAIG@MYAC	D.NET		- 1881 141	යා	1
			to be used for future a	nnual report no	otification)	, Ti	<u> </u>	Factory L
For fu	ther information con	cerning this matter, please of	call:			23.7. 7.1.9.7.	Ω Ω	-
	CRAIG	SCHNUER	at (954_)	<u> </u>	914-3282	Sid A	တိ	
	Name of P	erson		a Code & Dayt	time Telephone Nurr	iber	-	
Enclos	ed is a check for the	following amount:						
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Certified Co (additional o		Certification Ce	Filing Fee ficate of St fied Copy tional copy	tatus &	
	Registrati Division P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, FL 32314	Rep Div Cli	gistration Sec vision of Corp fton Building	porations	::		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIVE MONKEYS LLC

(Name of the Limited Liability Con (A Florida Limit	npany as it now appears on ed Liability Company)	our records.)
The Articles of Organization for this Limited Liability Comp Florida document numberL11000128531	any were filed on <u>NOVE</u>	MBER 10, 2011 and assigned
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 "I"L.L.C."	Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		75
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	ng til
		Sys. 60
		To P
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	36
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		records, <u>enter the name of the nev</u>
Name of New Registered Agent:		
New Registered Office Address:	Enton E	Florida street address
	Enter F	ioriau sireei aaaress
	City	, Florida Zip Code
	CHY	Lip Coae

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

MGR = Ma MGRM = N	nager Ianaging Member			
<u> Fitle</u>	<u>Name</u>	Address	Type of Actio	
PRES	LUIS VILLEGAS	22429 THOUSAND PINE LANE BOCA RATON FL 33428	✓ Add Remove	
VPRES	SELVA EIRAS	18201 COLLINS AVENUE SUNNY ISLES FL 33160	✓ Add ☐ Remove	
VPRES	CRAIG SCHNUER	11548 NW 49 COURT CORAL SPRINGS FL 33076		
MGR_	CRAIG SCHNUER	11548 NW 49 COURT CORAL SPRINGS FL 33076	Add ✓ Remove	
			Add Remove	
			Add Remove	
). If amend — —	ding any other information, enter c	change(s) here: (Attach additional sheets, if necessar	12 JUH - S	
 Dated				

Page 2 of 2

Filing Fee: \$25.00