L11000141310

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J. SAULSBERRY EXAMINER

JUN 2 7 2013

COVER LETTER

TO:

Registration Section Division of Corporations

SUSVIN GENERAL LLC

SUBJECT:

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:

LEONARDO FRANYIE

Name of Person

FRANYIE CONSULTING GROUP

Firm/Company

6625 MIAMI LAKES DR #220

Address

MIAMI LAKES, FL 33014

City/State and Zip Code

LAFRANYIE@GMAIL.COM

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

For further information concerning this matter, please call:

LEONARDO FRANYIE

<u>.</u>78€985-1492

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certilicate 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

SUSVIN GENERAL 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 L Florida document number L11000141310	iability Company	were filed on 12/16/2	2011	and	d assig	ned
This amendment is submitted to amend the foll-	owing:					
A. If amending name, enter the new name o	f the limited liab	ility company here:				
The new name must be distinguishable and end wit "L.L.C."	th the words "Limit	ted Liability Company," tl	he designation "LI	C" or	the abb	reviation
Enter new principal offices address, if applic	able:	6625 MIAMI LAK	(ES DR #220)		
(Principal office address MUST BE A STREE		MIAMI LAKES, F	L 33014		2013	
	_		·-	<u>;;;</u>		•
				22 7.1	<u></u>	
Enter new mailing address, if applicable:		6625 MIAMI LAR	KES DR #220);;;;;;	26	yi - 4-4 €
Mailing address MAY BE A POST OFFICE BOX)		MIAMI LAKES, F	L 33014		Â	; ;
				35 52	ά	
				1.	0	
B. If amending the registered agent and/or the new registered of	or registered off fice address here	fice address on our re ≧:	ecords, <u>enter th</u>	e nan	ne of t	the new
Name of New Registered Agent:	LEONARD	O FRANYIE				
New Registered Office Address:	6625 MIAM	II LAKES DR #220)			
The Augustica Office Facilities		Enter Flo	orida street addre	ess		
	MIAMI LAK	ES	, Florida <u>3</u> 30)14		
		City	, i wilua	Zip (Code	
New Registered Agent's Signature, if changing I	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 Agen

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 = Man MGRM = M	ager anaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Kemove
			Add
			Remove
			6 A
			Add Add Add Add Add Add
			Remove
			Remove

If amending any other inf	formation, enter change(s) here: (Attach additional sheets, if necessary.)
	
06/22/2012	
ed 06/23/2013	· · · · · · · · · · · · · · · · · · ·
	(<u>6</u>)
 -	Signature of a member or authorized representative of a member
	Hugo Cermana Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00