## 12000006040

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
,					
Contillant Coming					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
FEB 2 7 2012					
L SELLERS					
L. GLEEN					

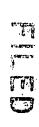
Office Use Only



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12 FEB 24 PM 1: 22 SECRETARY OF STATE TALLAHASSEE, FLORID



## COVER LETTER

TO:	Registration Sect Division of Corpo			
SUBJE	ECT:	Name of Limited Liability Company		
The en	closed Articles of A	mendment and fee(s) are submitted for filing.		
		dence concerning this matter to the following:		
		FEDELLO 04VIELL Name of Person INTEREACY EXCHANGE INC		
		INTERESTY EXCHANGE INC		
		235 UNWW W #310		
MIAMI BEAUL FL 33139  City/State and Zip Code				
		E-mail address: (to be used for future annual report notification)		
For fur	ther information con	cerning this matter, please call:		
<del></del>	Name of P	rerson at () Area Code & Daytime Telephone Number		
Enclose	ed is a check for the	following amount:		
<b>\$</b> 25	.00 Filing Fee	\$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status 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

	UC
(Name of the Limited Liability C (A Florida Lin	Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Corollog (Corollog)	mpany were filed on 11212 and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limite</u>	ed liability company here:
The new name must be distinguishable and end with the words L.L.C."	s "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRE	CSS)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
. •	
B. If amending the registered agent and/or register registered agent and/or the new registered office address	red office address on our records, enter the name of the new ss here:
	IALL
Name of New Registered Agent:	
New Registered Office Address:	25 2 France   12   12   12   12   12   12   12   1
-	Enter Florida street address
	, Florida
	City

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 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						
<u>Title</u>	<u>Name</u>	Address	Type of Action			
<u> 14R</u>	ROSANA BUSTIL	1068 SW 1100 AVE HIAMI FC 331893	Add Remove			
<u> 1161</u>	JANINA BIANCHI	3301 NE 5 AVE \$101 MIANU FL 33137	Add Remove			
			Add Kemove 			
			Add Remove 			
			Add Remove			
			Add Remove			
D. If amend	ing any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	_			
			_			
Dated	1//	or authorized representative of a member	_			
	<del></del>					

Page 2 of 2

FilingFee: \$25.00