L12000012778

5. E.S.

(Requ	uestor's Name)	
	·	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Nar	ne)
(Doci	ument Number)	·
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	
		:
		`

Office Use Only

B. KOHR
JUN 2 7 2012
EXAMINER



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06/15/12--01042--011 **7.50

06/04/12--01021--017 **52.50

SECRETARY OF STATE DIVISION OF CORPORATION

12 JUN 27 AN EX 28

Missing Roy Gram



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 6, 2012

BIG MOMMAZ LLC JOSHUA JIMENEZ 3651 NW 23 AVE. MIAMI, FL 33142

SUBJECT: BIG MOMMAZ LLC Ref. Number: L12000012778

ON TECRNIC OF STATIONS
ON THE OF

We have received your document for BIG MOMMAZ LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly Regulatory Specialist II

Letter Number: 512A00016051

COVER LETTER

Division of Corpo			
SUBJECT:	Big momm	192 LLC	
	Name of Limit	ted Liability Company	to Topic
The enclosed Articles of Ar	mendment and fee(s) are sub	omitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	The state of the s
		OSHUA Jimenez Name of Person	12 JUN 27 MA CON 28
	B1	MOMMA2 LLC Firm/Company	
	365	SI NW 23 AVE	
	Mian Blamom	City/State and Zip Code MAZUC @ ROWETMP to be used for future annual report notificat	
For further information cor	E-mall address: (•	ion)
JOSHVA Name of I	Jimenez Person	at (<u>308) 213 - 80</u> Area Code & Daytime To) 69 elephone Number
Enclosed is a check for the	following amount:		. /
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
NA II IN	VC ADDDECC.	own port (CAMBIEL	ADDDECC.

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

Big Mommaz	ILC STEED
(Name of the Limited Liability Compar (A Florida Limited L	v as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number 1200001278.	were filed onO() 27 2012 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and end with the words "Limit	LLC.
The new name must be distinguishable and end with the words "Limit"L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	10790 Su 24th STREET
(Principal office address MUST BE A STREET ADDRESS)	Miami, Florida; 33165
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	. Florida
	City Zin 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 = M MGRM =	anager Managing Member		
Title	Name	Address	Type of Action
			Add Remove
****	And the second s		Add Remove
***************************************			Add Remove
			Add Remove
			Add Remove
***************************************			Add
		e(s) here: (Attach additional sheets, if necessar, I And Change To: Lewfu Business =	
	VINE CHE // AA	30	
Dated		or authorized representative of a member	
		or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00