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B. BOSTICK
MAR 6 2012
EXAMINER

COVER LETTER

TO:	Registration Se Division of Cor		v ·				
SUBJE	ECT:	AV	Equity, LLC				
		Name of Lim	ited Liability Company				
The end	closed Articles of	Amendment and fee(s) are sul	omitted for filing.				
Please	return all correspo	ondence concerning this matter	to the following:				
		Jorge	Sanchez-Galarraga,	Esq.			
			Name of Person				
		Sa	inchez-Galarraga, P.A	<u>4.</u>			
			Firm/Company				
		1313	Ponce de Leon Boule	evard			
			Address				
		Cor	al Gables, Florida 331	134			
			City/State and Zip Code		₹.		
		D-mail address /	jsg@sgpalaw.com to be used for future annual rep	ort notification)		12 H ist	
For fum	than information a	·	·	on nonneanony		Ä	
roi iui	mer information c	oncerning this matter, please of	an.		())-	ال	30,000
		anchez-Galarraga	at (_305)	445-5351	<u> </u>	70	ا 1 ارسا امرو ا
	Name o	f Person	Area Code &	Daytime Telephone Number	SSEE, FLORIDA	7:30	
Enclose	ed is a check for th	ne following amount:					
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e	nclosed) Certified	te of Statu		ed)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327 assee, FL 32314	Registration Division of Clifton Bui	Corporations lding stive Center Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	AV Equity, LLC			
(Name of the Limite	d Liability Company as it now A Florida Limited Liability Com	appears on our records.)		
The Articles of Organization for this Limited I	Liability Company were filed o	on <u>January 30, 201</u>	2 and assigned	
Florida document number L1200001	4054			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited liability compa	ny here:		
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability	Company," the designation '	"LLC" or the abbreviation	
Enter new principal offices address, if appli	cable:		20 8	
(Principal office address MUST BE A STRE	ET ADDRESS)		3	
			The transfer of the same	
Enter new mailing address, if applicable:			THE TOTAL STATE OF THE PARTY OF	
Enter new maining address, it applicable: (Mailing address MAY BE A POST OFFICE			SE S	
Muung uuuress mat DE AT OST OF FICE			33 07 7	
B. If amending the registered agent and registered agent and/or the new registered of		s on our records, <u>enter</u>	the name of the new	
Name of New Registered Agent:	Jose Abreu			
New Registered Office Address:	630 West 72nd Place			
	Enter Florida street address			
	Hialeah	, 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

Page 1 of 2

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

7

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Hortensia G. Abreu	630 West 72 Place Hialeah, Florida 33014	Add Remove
			Add Remove
			Add Remove
			Add Remove
<u></u>			AddRemove
			AddRemove
D. If amend	ling any other information, enter c	hange(s) here: (Attach additional sheets, if necessor	nry.)
			12 TAL
Dated	March 2	2012	2 HAR -5
	Signature of a mo	ember or authorized to be sentative of a member	PH 7 30
	Jose	Abreu, Managing Member	
	Т	yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00