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SECRETARY OF STATIONS
DIVISION OF CORFORATIONS
12 MAR 12 FM 4: 50

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Miami Cell & Tech LLC 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:
YUR? A. ARape  Name of Person
Miami Cell & Tech Luc
5713 NW 114th CT Apt 112
Miami Fl 33178  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
VURY A. ARADE at (186) 332 – 8338  Name of Person at (186) 332 – 8338  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:  \$\$\text{\$\exititt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\
(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

lity Company as it now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on 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 "Limited Liability Company," the designation "LLC" or the abbreviation

Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:		
	Enter F	lorida street address
		, Florida
	Citv	Zin Code

New Registered Agent's Signature, if changing Registered Agent:

(Mailing address MAY BE A POST OFFICE BOX)

Florida document number

"L.L.C."

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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
ratary	Javier E. Suarez	8701 SW 82 COURT MIAM! FI 33143	Add Remove
			Add Remove
			Add Remove 
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	_
			_
Dated	3/05/2012		_
<i></i>	Signature of a mamber	or authorized representative of a member	<u> </u>
	Typed	r printed name of signee	

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Filing Fee: \$25.00