## L12000031263

•					
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
-					
Special Instructions to Filing Officer:					
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SECRETARY OF STATIONS
DIVISION OF CORPORATIONS
12 MAR 26 AM 88 26

## COVER LETTER

	tion Section of Corporations		1 .
	` `	IDANILLO	•
SUBJECT:		JDAN LLC ited Liability Company	
71		li colonia Can Cillian	
	cles of Amendment and fee(s) are sul		
Please return all co	orrespondence concerning this matter	r to the following:	
			÷ 125
		RUT FREIBERG	
		Name of Person	2
		RUDAN LLC	12 MAR 26 MA 89 26
		Firm/Company	<b>4</b> 8
	!	5016 SW 141ST AVE	26
		Address	
		MIRAMAR FL. 33027	
	**************************************	City/State and Zip Code	
	RUTO	CONSULTORA@ME.COM (to be used for future annual report notific	estion
For further inform	nation concerning this matter, please		, action )
	DUT EDEIDEDO	205	AEDEDOE
	RUT FREIBERG Name of Person	at ( 305 )  Area Code & Daytime	4505005 Telephone Number
		·	•
Enclosed is a chec	ck for the following amount:		
\$25.00 Filing 1	Fee \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	MAILING ADDRESS: Registration Section Division of Corporations	STREET/COURING Registration Section	1

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1. 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	RUDAN LLC		
(Name of the Limited L	iability Company as it now appolorida Limited Liability Company	ears on our records.)	9,0
(///	iorida Emitted Elaomity Company	'	1000
The Articles of Organization for this Limited Liab	oility Company were filed on _	MARCH 5 2012 and as	SECRETATION 26 M 81 26
Florida document numberL120000312	63 .		12 G
			- 12 T
era t	•		<b>19</b>
This amendment is submitted to amend the follow	/ing:		3
A. If amending name, enter the new name of t	he limited liability company h	ere:	<b>'</b> O'
7 4		ortuments and "	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Corr	pany," the designation "LLC" or the	abbreviation
5.2.0			
Enter new principal offices address, if applicab	ole:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	OX)		
	• · · · • · · · · · · · · · · · · · · ·		
B. If amending the registered agent and/or	registered office address or	our records enten the name	of the nov
registered agent and/or the new registered office		our records, enter the hame	of the nev
Name of New Registered Agent:			
New Registered Office Address:			
Hew Resistered Office Address.		Enter Florida street address	
	ANTIFOL A TILLING OF PAR MINER AUDI		
		, Florida	
	City	Zip Coa	le

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 us 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

1

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	LAURA SANCHEZ	5016 SW 141ST AVE MIRAMAR FL 33027	Add _☑ Remove
<del></del>			Add Remove
			Add Remove
			Add Remove
			Add Remove
<del></del>			Add Remove
D. If amend	ing any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	
			<del>-</del> -
	alialia		
Dated XO	X Dun frei be	or authorized representative of a member	·····
		UT FREIBERG	
·	Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00