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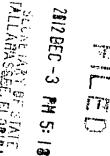
(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Special Instructions to	Filing Officer:	LUNT
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COVER LETTER

TO:

Registration Section-

. Division of	Corporations			
SUBJECT:	AMERICAN STAF	R ADMINISTRATION LLC		
SOBJEÇI:				
The enclosed Article	s of Amendment and fee(s) are su	bmitted for filing.		
	espondence concerning this matte			
		AURELIO A PIEDRA		
		Name of Person	- 	
	F	PIEDRA & COMPANY		
	Firm/Company		2812 BEC	
	9100 SOU	9100 SOUTH DADELAND BLVD STE 912		
		Address	SSE CO	
		MIAMI, FL. 33156		
		City/State and Zip Code		
	E-mail address:	elio@vargaspiedra.com (to be used for future annual report notification	n) 😅	
For further informati	on concerning this matter, please	call:		
	IRELIO A PIEDRA	at (1-0003	
Na	me of Person	Area Code & Daytime Tel	ephone Number	
Enclosed is a check to	for the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & 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 A Registration Section Division of Corporation Clifton Building 2661 Executive Center	ns	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMERICAN STA	R ADMINISTRAT	ION LLC			
(<u>Name of the Limited Liability</u> (A Florida l	Company as it now appea Limited Liability Company)	<u>rs on our reçords.</u>)			
The Articles of Organization for this Limited Liability C	company were filed on	03/19/2012	{	and assig	gned
Florida document number L12000038432					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lim	ited liability company he	<u>re</u> :			
The new name must be distinguishable and end with the wor "L.L.C."	rds "Limited Liability Comp	any," the designation	"LLC"	or the ab	breviation
Enter new principal offices address, if applicable:	,		28.0		
(Principal office address MUST BE A STREET ADDR	(ESS)		<u>~</u>	25	
			2>5	7 28 F	h#meg ps
			35	5	**************************************
Enter new mailing address, if applicable:			の 四 二	ယ်	
(Mailing address MAY BE A POST OFFICE BOX)			7,7		117
			25	८ग	-
			₩ [7 .	64	
B. If amending the registered agent and/or regist		our records, <u>enter</u>	the n	iame of	the nev
registered agent and/or the new registered office add	ress here:				
Name of New Registered Agent:					
New Registered Office Address:					
	E	nter Florida street ac	ddress		
		, Florida _			
	City		Z_i	ip 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 = Manager MGRM = Managing Member

Title .	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	CAROLINA GACIO		□ Pamova
			Add Remove
-,			
			D D amouto
			Remove
			Add Remove
D. If amend	ing any other information,	enter change(s) here: (Attach additional sheets	s, if necessary on the
	,		
Dated	JULY 31	, 2012	
	Signature	Typed or printed name of signed	ster Agent

Page 2 of 2

Filing Fee: \$25.00