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2 AUG 13 PH 2: 43

C. LEWIS

AUG 1 4 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corpo		**************************************	en e
معمر	ROME	HOLDINGS, LL	<u> </u>
SUBJECT:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ed Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	
	CHAI	PLES J. BRU	CK
		Name of Person	
	Rom	ie holdings	>, LLC
		Firm/Company	106-700
	701 S.	HOWARD AVE	, suite 106-322
		Address	
	TAME	DA FL 336	.06
	- 1-	City/State and Zip Code	
• •	Chas	Obcida. Con o be used for future annual report notifica	1
For further information and	icerning this matter, please or		ion)
\bigcirc		4.0	- 0010
CHARLES		ar (T	5-9210
Name of P	Person	Area Code & Daytime T	elephone Number
Enclosed is a check 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)
MAILIN	IG ADDRESS:	STREET/COURIE	R ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED 12 AUG 13 PM 2: 43

(Name of the Limited Liability Company as it now appears on our records.) LE, FLORID

(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on ______4.10.2012 Florida document number <u>112000048845</u> 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 "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: S. HOWARD AVE. SUITE 106-322 New Registered Office Address: Enter Florida street address TAMPA

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, 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
mgr	SOHO CAPITAL, LLC	701 S. HOWARD AVE SUITE 106-322	Add Remove
		TAMPA FL 33606	<u>. </u>
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			AddRemove
D. If amen	ding any other information, enter change	e(s) here: (Attach additional sheets, if necessary	<i>v.</i>)
_			
			FIL 12 AUG 13
Dated	- CDM	<u> </u>	PM 2: 43
	/ CHAR	or authorized representative of a member LES J- BRULK · or printed name of signee	>

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Filing Fee: \$25.00