Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CLARA GIRALDO, P.A.

Account Number : 119990000017

: (305)485~9300

Phone Fax Number

: (305)485-1098

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Email	Address:	
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B. BOSTICK

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MAY - 3 2012

EXAMINER

ARTICLES OF AMENDMENT

TO ARTICLES OF ORGANIZATION OF The Articles of Organization for this Limited Liability Company were filed on Florida document number 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: New Registered Office Address: Enter Florida street address

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 heing 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.

City

If Changing Registered Agent, Signiture of New Registered Agent

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LARA GIRALDO P.A. 1080 SW 84 AVENUE SUITE C MAMI, FL 33155 'H.: (305) 485-9300 05/02/2012 10:40

MGR = Manager

3054851098

BERRIZ&GIRALDO

H12 000 121 8343.

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:

MGRM = Managing Member Title Name. <u>Address</u> Type of Action HONTANO, GOSTANO Remove MGR. ESCOBARDE HONTAND, CARVENT 8836 N □ Add Add Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) PILAR LIONTANO

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Signature of a member or authorized representative of a member

TANG LIM 7.9M.

H12 000 121 1343.