L12000	1055466
Antoso LLC - 1019 Kane Conlourse Bout Harbor Islands - FL 33154	500239140595
(City/State/Zip/Phone #)	09/06/1201019021 **25.00
Certified Copies Certificates of Status Special Instructions to Filing Officer:	THE AN BE 22 SECRETARY OF STATE TALLATASSEE, FLORIDA
Office Use Only	SEP 21 2012

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ANTOS	SO LLC	
(Name of the Limited Liability Compa (A Florida Limited L	inv as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L12000055466</u>	LAR SE I	
This amendment is submitted to amend the following:	Total a	.*
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and end with the words "Limi	ited Liability Company," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	1019 KANE CONCOURSE	
(Principal office address MUST BE A STREET ADDRESS)	BAY HARBOR ISLANDS, FL 33154	
Enter new mailing address, if applicable:	1019 KANE CONCOURSE	

(Mailing address MAY BE A POST OFFICE BOX)

BAY HARBOR ISLANDS, FL 33154

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:

New Registered Office Address:	1019 KANE CONCOURSE		
, and a second secon	Enter Florida street address		
•	BAY HARBOR ISLANDS	. Florida	33154
	City		Zip 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, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

.

Title	<u>Name</u>	Address	Type of Action				
MGRM	SOPHIE TRIPIER	2701 S Bayshore Dr Ste 402 MIAMI, FL 33133	Add ✓ Remove				
<u>MGRM</u>	ANTONY FARS	<u>2701 S Bayshore Dr Ste 402</u> MIAMI, FL 33133	Add Z Remove				
MGRM	SOPHIE TRIPIER	1019 KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154	Add Remove				
MGRM	ANTONY FARS	1019 KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154	Add Remove				
			Add Remove				
			Add Remove				
D. If amend	ing any other information, enter c	hange(s) here: (Attach additional sheets, if necessary.)					
	·		SECRETARY OF STA				
Dated	08/29 ,	2012	TI BE 22				
	Signature of a mo	ember or authorized representative of a member	<u>>></u>				
		SOPHIE TRIPIER / ANTONY	EARSY				
Typed or printed name of signee							



Filing Fee: \$25.00