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J. SAULSBERRY EXAMINER JUL 5 2012

COVER LETTER

TO: Registration Division of C			
SUBJECT:	17951 ١	NW 17951 LLC	
30 b 0 L C1.		ited Liability Company	_
The enclosed Articles	of Amendment and fee(s) are sul	bmitted for filing.	·
Please return all corres	spondence concerning this matter	r to the following:	
		ASHLEY AMILCAR	
		Name of Person	
17951 NW 1795		7951 NW 17951 LLC	≥ 8
		Firm/Company	- <u>5</u> 2
		7951 NW 91st COURT	TAR TARS
		Address	
	. M I	IAMI LAKES, FL 33018	STA
		City/State and Zip Code	TATE
	pierr F-mail address:	re.amilcar61@gmail.com (to be used for future annual report notification)	2012 SE TAL
For further information	n concerning this matter, please	•	2012 JUL SECRETV
			ARY ARY SSE
	HLEY AMILCAR e of Person	at (7864) 541 6930 Area Code & Daytime Telephone Num	
Name	e of Person	Area Code & Daytime Telephone Num	12.43 85
Enclosed is a check fo	r the following amount:		30 ATE RIDA
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Certif (additional copy is enclosed) Certif	Filing Fee, icate of Status & ied Copy ional copy is enclosed)
Regi	ILING ADDRESS: istration Section	STREET/COURIER ADDRESS Registration Section	:

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 OF

Company as it now appears on our records.



(A Florida Limited Liability Company) 06/07/2012 and assigned The Articles of Organization for this Limited Liability Company were filed on _____ L12000075853 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: 17951 NW 17951 INVESTMENT LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 13150 NW 1 AVE Enter new principal offices address, if applicable: MIAMI, FL 33168 (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:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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>	Address	Type of Action
MGR	MURAL JUSTIN	13150 NW 1st AVE MIAMLEL 33168	✓ Add Remove
MGR	TANIA JULMISTE	17951 NW 91st COURT MIAMLEL 33018	Add Remove Add Remove Add Remove Add Remove Add Add Remove Add Add Remove Add Add Remove Add Add Remove
			Remove
D. If amo	ending any other information, enter	change(s) here: (Attach additional sheets, if ne	Add Remove SECRETARY OF STATE CONTROLL SECRETARY OF STATE CONTROLL SECRETARY OF STATE CONTROLL CONT
Dated	THE 29th OF JUNE Signature of a 1	2012 member or authorized representative of a member TulmistE Typed or printed name of signee Page 2 of 2	2012 JUL -2 AH 8: 30 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Filing Fee: \$25.00