L12000681674

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COVER LETTER

TO: ,	Registration Section Division of Corporation	1
	\/A D 4\/	

SUBJECT: YAPAY, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Daniel J. Serber

Name of Person

Serber & Associates, P.A.

Firm/Company

2875 NE 191st Street, Suite 801

Address

Aventura, FL 33180

City/State and Zip Code

info@serberlawfirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Danilo Jimenez

, 305 **932-6262**

Name of Person

Area Code & Daytime Telephone 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)

S60.00 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 ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YAPAY, LLC		
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our re Liability Company)	ecords.)
,		
The Articles of Organization for this Limited Liability Company	y were filed on 06/20/2012	and assigned
Florida document number L12000081674		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
		at at all on the abbreviation
The new name must be distinguishable and end with the words "Lin"L.L.C."	nited Liability Company," the de	esignation "LLC" or the appreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		Section 1
(Mailing address MAY BE A POST OFFICE BOX)		
Training address 1921 1 BENT 1 OST OF THOSE DOLL		The Control of the Co
	<u></u>	型式 ω *****
B. If amending the registered agent and/or registered of		ds, enter the name of the new
registered agent and/or the new registered office address he	ere:	
Name of New Registered Agent:		
N. D		
New Registered Office Address:	Enter Florid	a street address
		Florida
	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, 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 1	Type of Action
MGR	Ariztoy, Claudio A	2875 NE 191st Street, Suite 801	Add
		Aventura, FL 33180	Remove
MGR	S & A Company Management, LLC	2875 NE 191st Street, Suite 801	Add
•		Aventura, FL 33180	Remove
			Add
•			Remove
		上的 SSS ET	Add
		F.GAZ	Remove
			Add
			Remove
			. Add
			Remove

D. If amending any other information, er	nter change(s) here: (Attach additional sheets, if necessary.)
•	
Dated August 29th	<u>,</u> 2013
Signature o	of a member or authorized representative of a member
•	uthorized representative of the members
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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