

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000262461 3)))



Note: DO NOT	hit the REFRESH/	RELOAD butt	on on your	browser from	this page.
	Doing so will				

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : MARCELL FELIPE, P.A.

Account Number : I20110000064

Phone

: (305)381-8500

Fax Number

: (305)381-6225

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:	DMUNOZ Q	Marcell Felipe.com	
-------	----------	----------	--------------------	--

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TMA TIG LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

C. LEWIS

NOV -5 2012

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

PAGE ,02/04

SECRETARY OF STATE BIVISION BE 62487 GRATIONS

2012 NOV -2 AM 8: 22

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

a Limited Li	v as it now appea ability Company)	irs on our records.)	<u> </u>
Company	were filed on <u>07</u>	725/2012	and assigned
:			
mited Habi	lity company he	rre:	
		_	
vords "Limit	ed Liability Comp	any," the designation	n "LLC" or the abbreviation
	N/A		
DRESS)			
	N/A		
<u>ddress here</u>	ice address on	our records, <u>ent</u>	er the name of the new
<u> </u>		-,-,	
_			
<u> </u>			
<u> </u>	E	nter Florida street (address
<u>A</u>	E	nter Florida street . , Florida	 -
	Company mited Habi words "Limit DRESS)	Company were filed on 07 mited Hability company he words "Limited Liability Comp N/A DRESS) N/A pistered office address on Idness here:	mited Hability company here: words "Limited Liability Company," the designation N/A DRESS) N/A pistered office address on our records, entered dress here:

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, Stenature of New Registered Agent

Page 1 of 2

H12000262461 3

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managinu Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	Marlen Abrahantes	1805 N. Franklin Street	Add
		Tampa, FL 33602	Remove
١.			
MGR	Luis Isaias	1728 CORAL WAY	🗹 Add
		Miami, FL 33145	Remove
MGR	Andres Isias	1728 Coral Way	
		Miami, FL 33145	Remove
MGR	Andres Isaias	1728 Coral Way	~~
		Miami, FL 33145	Remove
			SEGRETARY OF STATE OUVISION OF CORPORATION: OU

H120002624613

•	
october 30	, 2012
	19 miles

Filing Fee: \$25.00