

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Z	ip/Phone #)			
PICK-UP UV	VAIT MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies Ce	ertificates of Status			
Special Instructions to Filing Officer:				

G. MCLEOD

STO 14 2012

EXAMINER



600239520666

09/13/12--01005--014 **25.00

12 SEP 13 AMII: 42
SECRETARY OF STATE
SECRETARY OF STATE
ALLAHASSEE. FLORIDA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	eberry, L	-LC	
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on ted Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Comp Florida document number <u>L 2000 15</u>		7/2012	and assigned
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 "L.L.C."	Limited Liability Company,"	the designation "LI	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES.	<u>s)</u>	Σ_{σ}	
		LAHASS	SEP 11
Enter new mailing address, if applicable:			- Frank-ande
(Mailing address MAY BE A POST OFFICE BOX)			
		ORIDA	-
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		records, <u>enter th</u>	e name of the new
Name of New Registered Agent:			
New Registered Office Address:		77	
	Enter Florida 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 = M	ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Giznczrlo	410 Mendian Ave Ste 101 Mizmi Beach Fr 33139	Add Remove
M6RM	Pietro Celcagno	410 Mondian Ave Str 101 Mizmi Beach Fr 33139	Add Remove
::			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	·.
_			_
			_ _
Dated	Signature of a member	r or authorized representative of a member	
	Richard Mar	K BERTOCI Tor printed name of signee	

Page 2 of 2

Filing Fee: \$25.00