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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

MARM, 2012, 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:

SIMONE OLIVEIRA

Name of Person

AMERICA EXPERT CORPORATION

Firm/Company

407 NW 10TH TERRACE

Address

HALLANDALE BEACH, FL 33009

City/State and Zip Code

simone@americaexpert.com

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

For further information concerning this matter, please call:

SIMONE OLIVEIRA

at (305) 824-9100

Name of Person

Area Code & Daytime Telephone Numbe

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)

□\$60.00 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

(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)		-	
The Articles of Organization for this Limited Liability Company w Florida document number <u>L12000136077</u>	rere filed on 10/25/2012	and	assign	ıed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabili	ty company here:			
The new name must be distinguishable and end with the words "Limited" L.L.C."	d Liability Company," the designation	"LLC" or ti	ne abb	reviation
Enter new principal offices address, if applicable:		1		
(Principal office address MUST BE A STREET ADDRESS)		# 1 8 A	<u>ت</u>	
		}- 	338	Cg.
		1	۲.,	
Enter new mailing address, if applicable:			فت	
(Mailing address MAY BE A POST OFFICE BOX)				ser.
		2.2		· .2
		1.		
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	e address on our records, <u>enter</u>	the name	e of t	he nev
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	, Florida _	······································		
	City	Zip Ci	ode	

New Registered Agent's Signature, if changing Registered Agent:

MARM 2012 LLC

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 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	MIGUEL R BORINO	1825 PONCE DELEON BLVD 50	9 Add
		CORAL GABLES, FL 33134	Remove
MGRM	MIGUEL R BORINO	1825 PONCE DELEON BLVD 50	9 🔽 Add
		CORAL GABLES, FL 33134	Remove
MGRM	ANTONIO BALZANO	1825 PONCE DELEON BLVD 50	
		CORAL GABLES, FL 33134	Remove
		<u> </u>	Add
			Remove
			Add
			Remove
			Add
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessor	iry.)
Dated OCTOBER 30/ 2013	
X Madatrulollus	
Signature of a member or authorized representative of a member	
MARIA A MURO	
Typed or printed name of signee	

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