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2013 JAN 28 PH 3: 10

COVER LETTER

A
TO: Registration Section
Division of Corporations ,
SUBJECT: DUO TRUST 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:
Zohar Pinhasi
Name of Person
<u>Duo</u> Irust
Firm/Company
1070 Waterside (n
Address
+10114WOOD 12 33019
and City/State and Zip Code O() OC() SQ: COM
2-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Zohar Pinhasi a1786 282 2821
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$25.00 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

FILED

· · · ARTIC	LES OF OR	GANIZATION	2013 JAN 28 PH 3: 10
	OF		SECRETARY OF STATE
DUO TR	RUST	LLC	RALLAHASSFE, FLox領海
(Name of the Limited Li (A F	iability Company Iorida Limited Lia	as it now appears on or	ır records.)
The Articles of Organization for this Limited Liab		10	100/.3
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of the	he limited liabili	ty company here:	
The new name must be distinguishable and end with ("L.L.C."	the words "Limited	l Liability Company," th	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicab	ole:		
Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	OX)		
			
B. If amending the registered agent and/or registered agent and/or the new registered office		ce address on our re	cords, enter the name of the new
Name of New Registered Agent:			
New Registered Office Address:		•	
		Enter Flo	orida street 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

Zip Code

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 = Ma	naging Member			
Title	Name /	0.010	Address 1070 waterside (n Hollywood Fr. 330	Type of Action
THOK	Gali	V111 has	1070 waterside in	Add
			Hollywood Fr 330	19 Remove
MGK	Zohar	<u> Pinhasi</u>	1070 waterside in	Add
			Hollywood Fl 300	Remove
				Add
				Remove
				Add
				Remove
				Add
				Remove
				Remove
				— —
				Add
				Remove

If ame	Eding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
-	
_	
-	
!	,,
	Signature of a member or authorized representative of a member
	ZONW PINHAS)
	Typed or printed name of signee

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Filing Fee: \$25.00

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