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12 DEC 14 PM 1: 14
SECRETARY OF STATE

K.SALY EXAMINER DEC 17 2012

COVER LETTER

TO: Registration Section , Division of Corporations
SUBJECT: Specialized Professional Services 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:
Jaine Galante. Name of Person
Firm/Company
19707 Tunberry Way 28 L
Aventura F1 33180 City/State and Zip Code Co)i 67 @ hotmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jai'me Galante at (786) 683 1907 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:

□\$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

□\$30.00 Filing Fee &

Certificate of Status

\$25.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

□\$60.00 Filing Fee,

Certified Copy

Certificate of Status &

(additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on 13 2012 and assigned Florida document number 117000147838 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 "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
Sr MGR	Jaime Galante	19707 turnberry Way 281	Add
MGR		Aventura F1 33180	
			Add Remove
			Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
			_ Add _ Remove
			Add Remove
			_

ated	Nou 23, 2017
	Signature of a member or authorized representative of a member
	Jaime Galante. Typed or printed name of signee
	Page 3 of 3
	Filing Fee: \$25.00

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