L12000155853

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2013 JAN 28 PH 3: 14

C. LEWIS

JAN 2 9 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

BEROZA MANAGEMENT, 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:

P. Todd Kennedy, Esq.

Name of Person

The Kennedy Law Firm, P.L.

Firm/Company

1675 Palm Beach Lakes Blvd., Ste 700

Address

West Palm Beach, FL 33401

City/State and Zip Code

kennedy@kennedypllaw.com

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

For further information concerning this matter, please call:

P. Todd Kennedy

,561,68**3-248**4

Name of Person

Area Code & Daytime Telephone Number

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

SECRETARY OF STATE DIVISION OF CORPORATION.
2013 JAN 28 PM 3: 14

BEROZA MANAGEMENT, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(A	Florida Limited Liability Company)	
The Articles of Organization for this Limited Li Florida document number <u>L12000155853</u>	ability Company were filed on	12/13/2012	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liability company h	ere:	
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Com	pany," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX		and it of a substitution of a
B. If amending the registered agent and/or the new registered of		ı our records, <u>ente</u> ı	the name of the new
Name of New Registered Agent:			
New Registered Office Address:		Enter Florida street a	ddress
		Florido	
	City	, Florida _	Zip Code
New Desistered Agent's Signature if changing I	Dagistarad Agant		

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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager FILED SECRETARY OF STATE DIVISION OF CORPORATION: or Managing Member, being added or removed from our records: MGR = Manager MGRM = Managing Member 2013 JAN 28 PH 3: 14 **Title** <u>Name</u> **Address Type of Action** DAVID BEROZA 1004 Island Drive MGRM Delray Beach, FL 33483 Remove Remove Remove Add Remove

	nending any other information, enter change(s) here: (Attach additiona	SECRETARY OF STA DIVISION OF CORPORAL
		2013 JAN 28 PM 3:
ated	Jan. 25, 2013	
	Signature of a member or authorized representative o	f a member
	Lawrence Beroza, Auth Rep of Typed or printed name of signee	

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Filing Fee: \$25.00