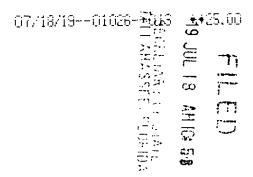
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COVER LETTER

	egistration Sec ivision of Corp		,	
SUBJECT	MIAMLAT			
SOBJECT	•	Name of Lim	ited Liability Company	
The enclos	ed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please retu	rn all correspo	ndence concerning this matter	to the following:	
		ARTHUR POROSOFF		
		-	Name of Person	
		MIAMI ATA LLC		
			Firm/Company	
		3020 SW 28TH STREET		
			Address	
		MIAMI FL 33133		
			City/State and Zip Code	
		ARTDAVID@GMAIL.CO		<u> </u>
		E-mail address: ()	to be used for future annual report notif	fication)
For further	information co	oncerning this matter, please ca	all:	
MANNY	J. VADILLO		305 436-1410 at ()	
	Name of	Person	Area Code Daytimo	e Telephone Number
Enclosed is	s a check for th	e 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

MIAMI ATA LLC				
(Name of the Lim	ited Liability Company as it now appo (A Florida Limited Liability Company	ears on our records.)		
The Articles of Organization for this Limited Liability Company were filed on $\frac{01/02/2013}{\text{Elorida document number}}$				
This amendment is submitted to amend the fol	lowing:			
A. If amending name, <u>enter the new name</u>	of the limited liability company	<u>here</u> :		
The new name must be distinguishable and contain the	words "Limited Liability Company." the	e designation "LLC" or the abbrevia	tion "L.L.C."	
Enter new principal offices address, if appli	cable:	<u> </u>	A	
Principal office address MUST BE A STRE	- Tin 数数 おも	= 1		
Enter now mailing address if applicables			2 1	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)			3	
		<u> </u>	40	
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:		on our records, <u>enter the</u> i	name of the	
 	11402 NW 41ST STREET, SUI			
New Registered Office Address:	Enter Florida street address			
	DORAL	, Florida <u>33178</u>		
	City	Zij) 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	DANIEL E STONE		□ Add
		1200 BRICKELL AVE #1470 MIAMI FL 33131	■ Remove
			Change
MGR	ARTHUR POROSOFF	3020 SW 28TH STREET MIAMI FL 33133	■ Add
			□ Remove
			☐ Change
			Add
			Remove
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ffective d	ate, if other than	the date of fili	ng:			(option		45 <u>29</u>	
Note: If the	edate is listed, the date e date inserted in th effective date on th	is block does no	meet the app	licable statute					
	specifies a dela h day after the			not an effe	ctive time, a	: 12:01 a.r	n. on t	he ea	rlier of:
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***		Signature of	a member or au \	unorizea repre	seniative of a men	пег			