MAR-29-2013 11:04 From:

To:18506176383

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Rough Department of State

Districtions Electronic Filing Cover Sheet

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(((H13000071635 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : VARGAS, PIEDRA & CO.

Account Number : I20070000148 Phone : (305)671-0003 Fax Number : (305)671-6263

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WE ARE 8 LLC

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APR -1 2013

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Corporate Filing Menu

Help

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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

WE ARE 8 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:

AURELIO A PIEDRA

Name of Person

VARGAS, PIEDRA & CO

Firm/Company

9100 SOUTH DADELAND BLVD STE 912

Address

MIAMI, FL. 33156

City/State and Zip Code

AURELIO@VARGASPIEDRA.COM

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

For further information concerning this matter, please call:

AURELIO A PIEDRA

Name of Person

.,305,671-0003

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

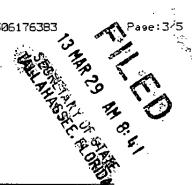
\$25.00 Filing Fee

□\$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



WE ARE 8 LLC

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

The Articles of Organization for this Limited Lia	bility Company were filed on <u>03/07</u>	/2013 and assigned
Florida document number L13000035181	.	
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of t	the limited liability company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applica	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered off		records, enter the name of the new
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:		AL . 1
	Enter (Florida street address
	City	, Florida
	City	Zip Coae

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 Changing Registered Agent, Signature of New Registered Agent

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 = Ma MGRM = M	onager Managing Member		
Title	Name	Address <u>T</u>	ype of Action
MGR	LOBA INVESTMENT GROUP, INC	2501 S OCEAN DR STE 105	Add
		HOLLYWOOD, FL. 33019	Remove
			
			Add
			Remove
			Add
			Remove
			Ada
			Remove
			<u>-</u>
			Add Remove
			-
			Add
			Remove

If amending any other information	on, enter change(s) here: (Attach additional sheets, if nece	ssary.)		
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MARCH 22				
Oscar (4 morelli			
OSCAR AMO	ature of a member or authorized representative of a member RELLI			
	Typed or printed name of signee			

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Filing Fee: \$25.00