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Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SMALL BUSINESS RESOURCES USA,

Account Number : I20040000173 Phone

: (407)298-4646

Fax Number

: (407)297-0588

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

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CINHARCO CAPITAL, LLC

Certificate of Status 1 0 Certified Copy Page Count 01 Estimated Charge \$30.00

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MAY 2 8 2013

EXAMINER

1 of 2

FAX AWITH H13000 17-0963

af TO:™ Registration Section Division of Corporations

Cinharco Capital, 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:

James K. Duerr, CPA

Small Business Resources USA, Inc.

Firm/Company

1601 Park Center Drive, Ste. 6A

Orlando, FL 32835

City/State and Zip Code

JimD@sbrorlando.com

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

For further information concerning this matter, please call:

James K. Duerr, CPA

at (407,298-4646

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

FAX AUDIT # H130001170963

4072970588

PAGE 03/05

FAX AUDIT # H 13000 1170963

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

FILED

13 MAY 24 AM 8: 40

SHORETANY GESTATE TABLAHASSEE, FLORIDA

Cinharco Capital, LLC				
(Name of the Limited	Liability Compa A Plorida Limited I	ny as it now appea liability Company)	rs on our records.)	
The Articles of Organization for this Limited I Florida document number L13000051041			•	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	oility company he	<u>re</u> :	
The new name must be distinguishable and end w'L.L.C."	th the words "Lim	ited Liability Comp	any," the designation "LLC" or the abbreviation	
Enter new principal offices address, if appli	cable:	2212 S. Chickasaw Trail		
Principal office address MUST BE A STREET ADDRESS)		Suite 144		
		Orlando, FL	32825	
Enter new mailing address, if applicable:		2212 S. Chi	ckasaw Trail	
Mailing address MAY BE A POST OFFICE BOX)		Suite 144		
		Orlando, FL 32825		
B. If amending the registered agent and registered agent and/or the new registered of	ffice address ber			
Triditio of their Registered Agents.				
New Registered Office Address:	1601 Park	Center Drive,		
		E	nter Florida street address	
	Orlando		Florida 32835	
		City	Zip Code	
Yew Registered Agent's Signature, if changing	Registered Agent:	L		

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, ibthis 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.

FAX AUDITH H 130001170963

MGRM

Haresh M. Khiani

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If amending the Managers or Managing Members on our records, enter the title hame, and address of each Manager or Managing Member being added or removed from our records: 13 MAY 24 AM 8:40 MGR = Manager SECRETARY OF STATE MGRM = Managing Member HATELAHASSEE, FLORIDA Type of Action <u>Title</u> **Address** Name Cynthia A. Khiani P.O. Box 781186 MGRM Orlando, FL 32878 P.O. Box 781186 Haresh M. Khiani **MGRM** Orlando, FL 32878 2212 S. Chickasaw Trail Cynthia A. Khiani **MGRM** Suite 144 Remove Orlando, FL 32825

Suite 144

Orlando, FL 32825

Add

Remove

2212 S. Chickasaw Trail

Add

Page 2 of 3

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FAX AYON # H 13000 117096 3

D. If amend	ing any o	ther information, e	enter change(s) here:	(Attach additional sheets, if necessor	ecessary.)	
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		<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>		<del></del>	
Max	, 14		2013			
Dated May	/ 14		<u>, 2013                                    </u>			
	_ <i>L</i> z	Signature	of a member or authoriz	zed representative of a member		
	Cynth	ia A. Khiani		•		
		Typed or printed name of signee				

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Filing Fee: \$25.00