L13000054068

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VORCHI JASSEL LIONE

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COVER LETTER

то	Registration Sec Division of Corp			
SUBJE	CCT:	Z JANCE Warne of Limite	ed Liability Company	
The end	closed Articles of A	amendment and fee(s) are subi	nitted for filing.	
Please	return all correspon	dence concerning this matter t	to the following:	
		SEVERINE	GiANESE PIT	THAN
			Firm/Company	2013 FALL
		701 BRIC	KEL AVENUE Address	CORETAGE TO SE
		MiAni'	City/State and Zip Code	新Y-7 編Ⅱ: METWRY OF STA AHASSEEL FLOI
		E-mail address: (to	VETER GHALL (be used for fifture annual report notificati	
For fur	ther information co	ncerning this matter, please ca	ماحد من	0205
_Se	Name of	GANESE - PITTH	Area Code & Daytime Te	and the second s
Enclose	ed is a check for the	e following amount:		
525 \$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

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v	'A '	
ZYANCE (Name of the Limited Liability Comme	LLC	AE R
(Name of the Limited Liability Compa (A Florida Limited)	Liability Company)	May = 11
The Articles of Organization for this Limited Liability Company	were filed on 04 12 3	O 3 and assigned
Florida document number 130000 54068		22 810%
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the designat	ion "LLC" or the abbreviation
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)	1717 North BA # 3335	
	HIAMI FL 3313	2
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		iter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
The state of the s	Enter Florida stree	et address
	, Floric	
	City	Zip 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 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	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add
			Remove
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	Gionekhithman .
	Signature of a member or authorized representative of a member
<u> </u>	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member SECELINE GIANESE - PITTMAN Typed or printed name of signee

Filing Fee: \$25.00

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