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COVER LETTER

TO: Registration Section Division of Corporations		'4
SUBJECT: DOOS Par	thers IC ne of Limited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Amendment and fed	(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Vicer	Name of Person S Partners 11 C Firm Company	
<u> D00</u>	s Partners IIC	
	•	
175	41 Birchwood dri	ve
VJS	City/State and Zip Code ODOS Par the 15 I address: (to be used for future annual report notification)	-(07)
For further information concerning this matt	r, please call:	
Vicente So	ric at (305) 404 660 Area Code & Daytime To	03 3 5
Name of Person Enclosed is a check for the following amoun		elephone Number
\$25.00 Filing Fee S30.00 Filing Certificate of	Fee & S55.00 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

DDOS Par-	tners	110			
(<u>Name of the Limited Lia</u> (A Flo	ibility Company orida Limited Lia	as it now appears of bility Company)	our records.)		
The Articles of Organization for this Limited Liabi Florida document number <u>L13000709.3</u>	lity Company w	ere filed onOS	1151201	3 and assigned	
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of th	e limited liabili	ity company here:			
The new name must be distinguishable and end with the "L.L.C."	e words "Limite	d Liability Company.	' the designation "	LLC" or the abbrev	iation
Enter new principal offices address, if applicabl	e:	601 N. a	ong rsc	Ave suite	63
(Principal office address MUST BE.4 STREET &	(DDRESS)	belray	beach 1	F1 3344	<u>s</u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>.X</u>)				-
B. If amending the registered agent and/or registered agent and/or the new registered office	registered offic e address here:	ce address on our	records, enter	the name of the	new
Name of New Registered Agent:	<u></u>			<u></u>	
New Registered Office Address:		541 Birch Emer	F7	nress	
_	BOCA	Palon Cin	Florida	33487	
·		Ciţi		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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Name</u>		Type of Action
Franz A Flores	8441 NW 68th St	_ Add
	Miami, FL 33166	Remove
		-
		_ Add
		Remove
		_
		Add Remove :
	17.5 12.4 13.4 13.4 14.4	it in
		Add
	*	Remove
		Add
		Remove
		Add
		Remove
		Franz A Flores 9441 NW 684h St Miami, FL 33166

D. If an	rending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	Manager / member detail Crew address.
	. IVAN GARCIA-Hidelgo
	new address: 17541 Birch wood drive, Boca Rabor FL 33487
	· Vicente SACIC
	New address 17541 Birch wood drive, Boca Palan FC33497
Dated _	July 7th, 2013.
	Want
	Signature of a member or authorized representative of a member
	Vicente Sarie
	Typed or printed name of signee
	Day 2 . 6 2

Page 3 of 3

Filing Fee: \$25.00