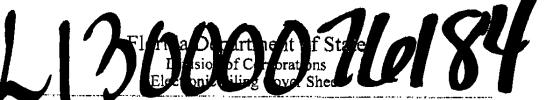
Division of Corporations

Page Lof 1



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H130001376153)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GUZMAN & GUZMAN, P.A.

Account Number : I20080000090

Fax Number

Phone : (305)670-1991 : (305)670-1993

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

Email	Address:			
	ALLEGO,			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SANFER LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

JUN 1 8 2013

D. BRUCE

Electronic Filing Menu

Corporate Filing Menu

Help

H 130001376153

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SANFER LLC	118 - 41.		
(A Flor	pility Company as it now appears on our records.) rida Limited Liability Company)		
The Articles of Organization for this Limited Liabil	ty Company were filed on 05/24/2013	and assigned	
Florida document number L13000076184			
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company here:		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the designation "LLC"	or the abbreviation	
Enter new principal offices address, if applicable			
(Principal office address MUST BE A STREET A	DDRESS)		
	Ä	φ 23	
	.UA		
Enter new mailing address, if applicable:	A A		
Mailing address MAY BE A POST OFFICE BOX	0	R 7	
	<u> </u>	P P I'm	
·	5		
B. If amending the registered agent and/or registered agent and/or the new registered office	egistered office address on our records, enter the address here:	name of the new	
Name of New Registered Agent:		<u></u>	
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
	City	Zip Code	
New Registered Agent's Signature, if changing Regis	stered Agent:		
the provisions of all statutes relative to the prope accept the obligations of my position as registere	gent and agree to act in this capacity. I further agree er and complete performance of my duties, and I am j ed agent as provided for in Chapter 608, F.S. Or, if th stered office address, I hereby confirm that the limite inge.	familiar with and his document is	

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

H 130001376153.

·05/17/2013 16:05

MGR = Manager

3056701993

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:

MGRM = Managing Member Title <u>Name</u> Address Type of Action 328 CRANDON BLVD **ALICIA CARRILES MGRM STE 222A-B** KEY BISCAYNE, FL 33149 Remove Remove

			·			
					····	
			aalta	\		
JUNE 1	3		20/13			
\times		07/				
GO	NZALO PI	RNANE	FZ CAST	ANO		
		-7-	Typed or printe	d name of signe : 3 of 3	6	
		7	rage	3 10 3		

2818 JUN 17 AM 10: 49