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JUL 2 3 2013

D. BRUCE

COVER LETTER

TO:

Registration Section Division of Corporations

CUR IFCT.

PSD, 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:

Guy D. Sperduto

Name of Person

Guy D. Sperduto CPA, PA

Firm/Company

8963 Stirling Road Ste 101

Address

Cooper City FI 33328

City/State and Zip Code

gsperduto@accountinglinkusa.com

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

For further information concerning this matter, please call:

Guy D. Sperduto

954₄32-0272

Name of Person

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

PSD, LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our re Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Organida document number L13000094144		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company," the de	signation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD.	RESS)	
		E. 79
Enter new mailing address, if applicable:		7. C
(Mailing address MAY BE A POST OFFICE BOX)		25 SE 55 SE
	- · · · · · · · · · · · · · · · · · · ·	Ly is the
B. If amending the registered agent and/or registered agent and/or the new registered office add		ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida	a street address
		Florida
	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, <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>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Pedro Sanchez	8080 W Flager St. 2A	Add
		Miami FL 33144	Remove
			Add
			Add
			Add
			Remove
			Add 7
		פא	Remove
		· 24	Add
			Remove
			Add
			Remove

. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
,		
		<u> </u>
ated July 16,	2013	
Pfa	far y	
700	Signature of a member or authorized representative of a member	er
Pedro Sanch	ez	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00

