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J. SAULSBERRY EXAMINER

SEP 9 2013

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: 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:			
Dominic Baratta	_		
Name of Person	_		
Job Media ((C	_		
Firm/Company			
8150 SW Brd Street			
	 3. ,	21	
N. Lauderdale/FL 33068 City/State and Zip Code	- : - :) S E ! [•
E-mail address: (to be used for future annual report notification)		7013 SEF -6	8 · 4
		3	
For further information concerning this matter, please call:	32	÷	
Name of Person Area Code & Daytime Telephone Numb	**	5 2	
Name of Person Area Code & Daytime Telephone Numb	er		
Enclosed is a check for the following amount:			
(additional copy is enclosed) Certific	iling Fee cate of St ed Copy onal copy	atus &	osed)

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

Name of the Limited Liability	y Company as it now appears of	n our records.)	
(A Florida	y Company as it now appears of Limited Liability Company)	, , , , , , , , , , , , , , , , , , ,	
The Articles of Organization for this Limited Liability of Florida document number <u>[13000107935</u>	•	30, 2013	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company here:		
The new name must be distinguishable and end with the wo	ords "Limited Liability Company,"	"the designation "LLC	C" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	<u>RESS)</u>		(4)
			SE "
		•	1
Enter new mailing address, if applicable:		* •	6
• • • • • • • • • • • • • • • • • • • •		/ -	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	<u> </u>
		<u> </u>	5
B. If amending the registered agent and/or registered agent and/or the new registered office add		records, enter the	name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter .	Florida street addres	S.S
		, 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

or Managing MGR = Mau	Member being added or removed from	m our records:	SEP STATE
	ager anaging Member		·
Title	<u>Name</u>	Address	Type of Action
M3/12	James Holowinski	8150 SW 380 51. N. Lavd.	Add Y
		FL,33048	Remove
MJLM	James Holowinski	8150 Sw 300 ST.	Add
		N. Landerdally 1233064	Remove
hen	Daid Hrin	U385 MARYTEBING	Add
	·	MARYSTE FL. 37043	Remove
Maen	Dominic Barata	830 NORTH RINORIDE Dr.	Add
		pumpano Bezin 33062	Remove
			Add
	A		Remove
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). If am	ending any o	ther informati	ion, enter change(s) her	e: (Attach addit	ional shee	ts, if neces.	sary.)
•	Need	Jame >	Holowinski 's	title	Cha	rged	Srom
, `	"OMGE	2)) to	Holowinski's "MORM" on	Sunbiz	to	open	
	pusines	s accou	nd.				
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ated <u>[</u>	- Jugust	* .	2013 M				
		Dermina	sature of a member or author	rized representati	ive of a me	mber	
	7	Dominic	Baratte	•			
	Typed or printed name of signee						
			Page	3 of 3			
			Filing Fo	ee: \$25.00			

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