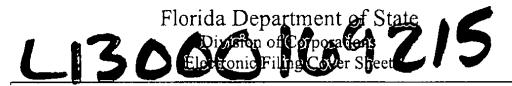
Division of Corporations



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.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PERLMAN, BAJANDAS, YEVOLI, & ALBRIGHT P.L.

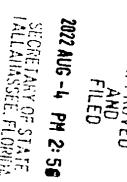
Account Number : I20040000167 Phone : (305)377-0809 Fax Number : (305)377-0781

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

Email Address: Corporate @ pbyalaw. com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BORJA & BORJA ASSOCIATES LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00



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Corporate Filing Menu

Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Be	ORJA & BORJA	ASSOCIATES LLC					
(Name of the Limite	d Liability Compa A Florida Limited I	ny as it now appears on our records.) Liability Company)	<del></del>				
The Articles of Organization for this Limited Lia Florida document number L13000169215 This amendment is submitted to amend the follo		were filed on 12/05/2013	and assigned				
A. If amending name, enter the new name of	the limited liab	ility company here:					
The new name must be distinguishable and contain the wo	ords "Limited Liabil	ity Company," the designation "LLC" or the abb	reviation "L.L.C."				
Enter new principal offices address, if applica	ıble:	6911 Caimwell Dr					
(Principal office address MUST BE A STREET	TADDRESS)	Boynton Beach					
		Florida 33472					
Enter new mailing address, if applicable:		6911 Caimwell Dr					
(Mailing address MAY BE A POST OFFICE E			Boynton Beach				
Minding duaress MAT DE ATOST OFFICE BOAT		Florida 33472					
B. If amending the registered agent and/or reagent and/or the new registered office address  Name of New Registered Agent:	s here:	address on our records, enter the name	of the new registered				
New Registered Office Address:	200 S. Andrews Ave, Suite 600		AHA OO				
New Registered Office Address.		Enter Florida street address	**** <b>*</b> ****				
	Fort Lauderdale , Flo						
New Registered Agent's Signature, If changing R	egistered Agent:	City	Code N				
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regis being filed to merely reflect a change in the r company has been notified in writing of this company has been notified in writing the company has been notified in w	er and complete stered agent as p egistered office change.	performance of my duties, and I am fa provided for in Chapter 605, F.S. Or, i,	miliar with and f this document is ited liability				

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Manuel Borja	6911 Cairnwell Dr	□Add
		Boynton Beach	□Remove
		Florida 33472	<b>≘</b> Change
MGR	Aracelli Biles	6911 Caimwell Dr	
		Boynton Beach	□Remove
		Florida 33472	<b>\(\bar{\bar{\bar{\bar{\bar{\bar{\bar{</b>
			□ Петоче
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Filing Fee: \$25.00