Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

(((H14000197766 3)))



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) 61.7-6383

From:

Account Name : PAUL SALVER, P.A. Account Number : 120020000087 Phone : (954)389-1333

Fax Number : (954)389-1397

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RAINDROPS ENTERPRISES, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$30.00

Electronic Filing Menu Corporate Filing Menu

Help

'AUG 2 2 2014

T. HAMPTON

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		NTERPRISES,		
(Name of the Limit	cd Liability Comps (A Florida Limited	ny as if now annears. Liability Company)	on our records,)	
The Articles of Organization for this Limited Li	ability Company	were filed on 6/6	/14	and assigned
Florida document number L14000091274				
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liab	llity company her	£:	
The new name must be distinguishable and end with the	words "Limited List	illity Company," the de	signation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		2675 SW 34TH AVENUE		
(Principal office address MUST BE A STREET ADDRESS)		PEMBROKE PARK, FL 33023		
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>		2675 SW 34TH AVENUE PEMBROKE PARK, FL 33023		
Name of New Registered Agent:	····			<u> </u>
New Registered Office Address:	2675 SW 34TH AVENUE			
	DELIDE OF		la street address	
	PEMBROK	L PARK	, Florida 3302	3 Zip Code
New Registered Agent's Signature, if changing 1	Jagletoneti Accus	•	•	up coae

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 605, 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

Page 1 of 3

If amending the Managers or Anthorized Member on our records, enter the fille, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Men AMBR = Aut	ager borized Member		
Title	Name	Address	Type of Action
			D Add
			🗆 Remove
			Remove
			<u> </u>
			C Remove
			D Add
			□ Remove
			14 AUG 21 AM IO: 53 TALLAH ASSEER LORIDA TALLAH ASSEER LORIDA
			G21 AM 10: 53 HANSEEP LORIDA
<u> </u>			_ ROAD
			O Remove

9543891397

D. If an	ADDRESS OF MANAGERS ABRAHAM AND MOISES GILINSKI					
	CHANGES TO 2674 SW 34TH AVE., PEMBROKE PARK, FL 33023					
(The e	etive date, if other than the date of filing:					
Date	4 × 8/21/14					
	Signature of a member or authorized representative of a member					
	X Almshan Gilinstei					
	Typed or printed name of signee					

Page 3 of 3

Filing Fee: \$25.00

