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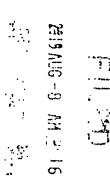
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## **COVER LETTER**

Division of Corporations
SUBJECT: MAIMI Cruise Sluip Services, 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:
Maine Gerson  Maine Chine Ship German, LLC  Firm/Company
1180 S. Amesica way
Mianu FL 33132  City/State and Zip Code
HITAYOUB 53 Q Vahoo Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
James HALFHIDE at (305) 905 - 3415  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed)  □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

MAIMI (RUIS) (Name of the Limited Liability (A Florida	ty Company as it now appears on our record a Limited Liability Company)	VICES, LLC
The Articles of Organization for this Limited Liability Color of Society 18000 1555  This amendment is submitted to amend the following:		- 3-0  8 and assigned
A. If amending name, enter the new name of the lim  A Mi CRUISE S  The new name must be distinguishable and contain the words "Lim		or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADD)	1180.5 Miam, F	AMerica wan
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our record <u>lress here</u> :	ls, enter the name of the new
Name of New Registered Agent:		7,2, 0
New Registered Office Address:	Enter Florida street addre	ं, · ठ
		lorida
	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 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

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>	Name	Address	Type of Action
Pre	HANY AYOUB	11805, America way Miam, FC 33132	_ <b>d</b> ∧dd
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E. Effective date, if other than the date of filing:	•	
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Page 3 of 3

Filing Fee: \$25.00