121000093666

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COVER LETTER

TO:	Registration Sect Division of Corpo			
SUBJI	ECT:	DEVIM Name of Limite	STRIBUTION OF THE PROPERTY OF	ON LIC
The en	closed Articles of A	mendment and fee(s) are subm	itted for filing.	
Please	return all correspond	dence concerning this matter to	the following:	
		Jerome	CARCIA Name of Person	<u> </u>
		Denim	Distribution Firm/Company	46
		4600 SW	67th Aven	ue APT 212
		MIAM	City/State and Zip Code oim - diskribubism. be used for future annual repor	SISS
		E-mail address: (to	be used for future annual repor	rt notification)
For fu	ther information cor	ncerning this matter, please cal	1:	
-	Decome Name of l	GARCIA Person	at (<u>786</u>) D	aytime Telephone Number
Enclos	ed is a check for the	following amount:		
□ \$2	5.00 Filing Fee	Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Company as it now appears on our records.) nited Liability Company)
The Articles of Organization for this Limited Liability Comp. Florida document number <u>121 000 83666</u> .	spany were filed on2_1821 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	l liability company here:
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS	s No change
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	No change
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our records, enter the name of the new registered
Name of New Registered Agent:	change
New Registered Office Address:	Enter Florida 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 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 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
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	(L18 cow 95 732)	MIAMI FL 33155	- ∑ □Remove
			□Change
An <u>BR</u>	Jerome GARCIA	4600 SW 67th Are Ad	<u>~ ?{ }</u> □ Add
		MIAMI FL 33155	A Remove \leftarrow
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is filed.	a delayed effective date	, but not an effective	mic, at 12.01 a.m	on the current on (o, me vom da, uner me
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Filing Fee: \$25.00