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PICK-UP WAIT MAIL
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COVER LETTER

TO:

TO: Registration S Division of Co			
SUBJECT:	Plenty Czem	LLC nited Liability Company	
	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Name of Person	
		Plenty bens LLC Firm/Company	
	<u></u>	L Healey St NW Address	
		Palm Bay FL 3290 City/State and Zip Code	
	SUppo E-mail addrest: ((to be used for future annual report notif	ncation)
For further information	concerning this matter, please e	eall:	
Name	of Person	at (3) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	6377 Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Division of 0 P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	ection porations allahassee Street, Suite 816

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Menty Gems 44	<u></u>
(Name of the Limited Liability Compa (A Florida Limited I	лу as it now appears on our records.) Liab(lity Company)
The Articles of Organization for this Limited Liability Company Florida document number 4210015398	were filed on $\frac{4/3}{3}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	950 Malabar Rd. SW #111016
(Principal office address MUST BE A STREET ADDRESS)	950 Malahar Rd. SW *Illolb Palm Bay, FL. 32907
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1462 Healey St NW Palm Bay, FL, 32-907
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent: Bran	Nelson
New Registered Office Address: 1462 High	eyst Nw. Palm Bay FC, 30907
	ey St Nov. Palm Bay FL, 32907 Enter Florida street address In Bay, Florida 32907 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. Ex 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

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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>	<u>Address</u>		Type of Action
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e ctive (effectiv	date, if other than we date is listed, the date	the date of fill e must be specific a	ing: and cannot be prior t	to date of filing or	more than 90 days	option after fi	i al) ling.) Purs	suant to 605.020
	he date inserted in the 's effective date on the			ible statutory fili	ng requirements	s, this c	late will	not be listed a
	occifies a delayed eff	fective date, but r	not an effective tir	ne, at 12:01 a.m	. on the earlier o	of: (b)	The 90t	th day after the
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ed	9/21/10		<u>}0}}</u>	<u> </u>			<u>ا</u> ا	. 1
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		Signature of	a member or autho	rized representativ	e of a member			. 7
		Signature of	0	rized representative of signee	ve of a member		ک <u>ب</u>	