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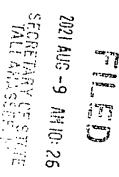
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## **COVER LETTER**

CT IN THE CO	THE ASSET BROKERS LLC				
SUBJEC	r:	Name of Lin	nited Liability Company	<del></del>	
Please rer	um au correspo	ndence concerning this matter	to the following:		
		MICHAEL CETTA			
		<del></del>	Name of Person		
		THE ASSET BROKERS	LLC		
			Firm/Company	· · · · · · · · · · · · · · · · · · ·	
		20711 SW 91 CT			
	T: Name of Limited Liability Company  sed Articles of Amendment and fee(s) are submitted for filing.  um all correspondence concerning this matter to the following:  MICHAEL CETTA  Name of Person  THE ASSET BROKERS LLC  Firm/Company  20711 SW 91 CT  Address  CUTLER BAY, FLORIDA 33187  City/State and Zip Code  M.CETTA21@GMAIL.COM  E-mail address: (to be used for future annual report notification)  or information concerning this matter, please call:  L CETTA  Name of Person  Area Code  1 S55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)  Addling Address:  (egistration Section  Division of Corporations  O. O. Box 6327  Tallahassee, FL 32314  Nome of Certific Apple and Control of Corporations  Division of Corporations  Person Certificate of Tallahassee  2415 N. Monroe Street, Suite 810				
		CUTLER BAY, FLORIDA	A 33187		
		M CETTA 21 GCMAIL CO	•		
		<del>-</del>		fication)	
For further	r information c	oncerning this matter, please c	all:		
MICHAE	L CETTA				
	Name o	f Person	Area Code Daytim	ne Telephone Number	
Enclosed	is a check for th	ne following amount:			
<b>■ \$25.0</b>	0 Filing Fee		Certified Copy	Certificate of Status & Certified Copy	
F I F	Registration S Division of C P.O. Box 632	Section orporations 7	Registration Se Division of Con The Centre of T	rporations Fallahassee se Street, Suite 810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE ASSET BROKERS LLC		
(Name of the Limited Liability Co. (A Florida Limit	mpany as it now appears on our recorded Liability Company)	rds.)
The Articles of Organization for this Limited Liability Compa	any were filed on	and assigned
Florida document number L21000321562		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
CETTA CO, LLC		
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>	<u> </u>
Principal office address MUST BE A STREET ADDRESS	2	NO 2
		Z. 8 1
		9 1
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		26
B. If amending the registered agent and/or registered offingent and/or the new registered office address here:	ce address on our records, <u>ente</u>	r the name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	en
		Torida
	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>	<u>Name</u>	Address	Type of Action
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A SA	Signature of a member or authorized repre-				

Filing Fee: \$25.00