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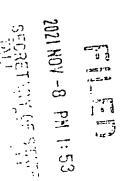
(Requestor's Name)				
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PICK-UP WAIT MAIL				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations				
	MAKO DEVELOPMENT LLC			
SUBJECT:	Name of Limited Liability Company			
The enclosed Articles	of Amendment and fee(s) are submitted for filing.			
Please return all corre	pondence concerning this matter to the following:			
	Luis MAKOTO OMATSU			
	Name of Person			
	MANO DEVELOPMENT LLC.			
	Firm/Company			
	645 WHITETAIL LOOP ARCHA FL 32703			
	Address			
	APOPLA, FLORIDA 32703			
	City/State and Zip Code			
	E-mail address: (to be used for future annual report notification)			
For further information	concerning this matter, please call:			
	\sim 0			
1-71-	010 UMATED KIED at (407) 6131579			
Nan	of Person Area Code Daytime Telephone Number			
Enclosed is a check for	the following amount:			
□ \$25.00 Filing Fee	**S30,00 Filing Fee & S55,00 Filing Fee & S60,00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)			
Mailing Ado				
Registratio	the state of the s			
Division o P.O. Box 6	Corporations Division of Corporations The Centre of Tallahassee			
	, FL 32314 2415 N. Monroe Street, Suite 810			
	Tallahassee, FL 32303			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



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	iability Company as it lorida Limited Liability ity Company were full ity Company were f	ity Company were filed on Ig: Ilmited liability company her "Limited Liability Company." the deser: DDRESS) tered office address on our recere: Enter Florica City	inbility Company as it now appears on our records.) florida Limited Liability Company) SECKE I. R.Y. Of TALL I. T.Y. Of TALL

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>	<u>Address</u>	Type of Action
MGR	JESSICA MERCEDEZ DALOCEHI POLE	645 WHITETAIL LOOP	a Add
		APOPRA, FLURIDA 32703	Remove
			Change
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			□Remove
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i amendi	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
 -	
Note: If the	date, if other than the date of filing:
d is filed.	
Dated	Signature of a member or authorized representative of a member LUIS MAKOTO DIATIO Rico Typed or printed name of signee
	Signature of a member or authorized representative of a member