#. 20400034127

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EXAMINER
MAR 1 2011

COVER LETTER

•	•			
SUBJECT:	CAS	TELVETRO		
	Name of Limi	ited Liability Company		_
	•		••••	e e e e e e e e e e e e e e e e e e e
The enclosed Articles o	of Amendment and fee(s) are sub	omitted for filing.		•
Please return all corresp	ondence concerning this matter	to the following:		
	Isa	belle Esther Azria, Esc	1.	
		Name of Person	·	_
		7DIA I AMETIDA DA		
	A	ZRIA LAW FIRM, P.A.		
		Firm/Company		
	1	000 5th Street, #200		
	 	Address		
		'' D EL 00400		
	M	iami Beach, FL 33139 City/State and Zip Code		
		•		
et 14.	E-mail address: (f	andy@azrialaw.com to be used for future annual repor	rt notification)	_
For further information	concerning this matter, please c			
of faction information	concerning this matter, pieuse e			
Sa	andy Calamai	at (305)	532-7350	
Name	of Person	Area Code & I	Daytime Telephone Num	ber
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is end	Certifi closed) Certifi	Filing Fee, icate of Status & ied Copy ional copy is enclose

MAILING ADDRESS:

Registration Section

Division of Corporations

TO:

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**

FILED
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corde AHASCOLET STATE

		SECTION 28 PM 4: 28
CASTE	ELVETRO, L.L.C.	TALL AND COME
(Name of the Limited Liability (A Florida I	Company as it now appear Limited Liability Company)	s on our records. HASSIE, FLORIDA
The Articles of Organization for this Limited Liability C Florida document number L0400034127		June 8, 2005 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company her	<u>e</u> :
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Compa	ny," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regist registered agent and/or the new registered office add		our records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	En	ter Florida street address
	City	, Florida 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

	Manager I = Managing Member		
<u>Title</u>	Name	Address	Type of Action
	-		Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If a	T -	(s) here: (Attach additional sheets, if necessary.)	
	ARTICLE IV is hereby amended as for This limited liability company shall be	managed by no less than one Manager	_
	or Managing Member.		_
Dated _	February 17 , 201	11	
	Signatura of a marchan	or authorized representative of a member	
	-	REEN, Managing Member of CASTELVE	TRO

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00