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TALLAHASSEE, FLORIDA

J. Stivers APR 22 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ALP MIAMI, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CARLOS NUNO DE FRANCISCO NUNEZ
Name of Person

ALP MIAMI, LLC
Firm/Company

2801 N.E. 208 TERRACE 2 nd FLOOR
Address

AVENTURA, FL 33180
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CARLOS NUNO DE FRANCISCO NUNEZ 305) 454-0915
Name of Person Area Code Daytime Telephone Number

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 enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
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**

ALP MIAMI LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/24/2012 and assigned Florida document number L12000010900.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: 2801 N.E. 208 TERRACE 2nd FLOOR
AVENTURA, FL 33180
(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: 2801 N.E. 208 TERRACE 2nd FLOOR
AVENTURA, FL 33180
(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: TEAM REAL ESTATE MANAGEMENT, LLC
New Registered Office Address: 2801 N.E. 208 TERRACE 2 nd FLOOR
Enter Florida street address
AVENTURA, Florida
City

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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.

Carlos Nuno de Francisco Nunez
CARLOS NUNO DE FRANCISCO NUNEZ
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager,
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Carlos Alberto Macchi	22311 S.W. 88 Path	<input type="checkbox"/> Add
		Cutler Bay, Fl 33190	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 04/06/2015 , _____

Carlos Nuno de Francisco Nunez

Signature of a member or authorized representative of a member

CARLOS NUNO DE FRANCISCO NUNEZ, MANAGER MEMBER

Typed or printed name of signee

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Filing Fee: \$25.00

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