Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FRAMAYA LLC

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Electronic Filing Menu

Corporate Filing Meny 2017

Help

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	FRAMAYA LLC	
(Name of the Limited L.	ability Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number <u>L12000135779</u>	ity Company were filed on 10/24/2012	and assigned
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the a	ibbreviation "L.L.C."
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET AL	ODRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	2	
B. If amending the registered agent and/or registered agent and/or the new registered office.		the name of the new
Name of New Registered Agent:	, , , , , , , , , , , , , , , , , , ,	<i>A</i> 85
New Registered Office Address:		<i>6</i> 9
HEW REGERENCE VALUES.	Enter Florida street address	2
<u></u>	, Florida	
	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
MGR	PEDRO MASSACESSI	1400 MEADO∜S BLVD	
		FT LAUDERDALE, FL 33327	☐ Remove
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ctive date, if other than	n the date of filing: we must be specific and cannot be prior to date of fi	(optional)	
ument's effective date on t record specifies a del- ne 90th day after the			
zi	2017		
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	Signature of a incompany august typrocentation	na of a mambar	
	PEDRO MASSACESSI		
	·Typed or printed name of signee		
			