

L13000057807

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

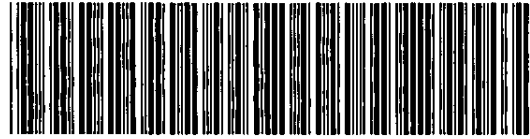
(Business Entity Name)

(Document Number)

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2013 OCT 28 PM 4:03
TALLAHASSEE, FL 32309

B. BOSTICK
OCT 29 2013
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: POWER FLOWER, 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:

Carolyn Kahl
Name of Person

ROCA GONZALEZ, PA
Firm/Company

2601 S. Bayshore Drive, Suite 725
Address

MIAMI, FLORIDA 33133
City/State and Zip Code

CKAHL@RGPA.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carolyn Kahl at **(305) 859-6050**
Name of Person Area Code & Daytime Telephone Number

TALLAHASSEE, FLORIDA
2013 OCT 28 PM 4:03

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**

POWER FLOWER, 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 April 19, 2013 and assigned Florida document number L13000057807.

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:

(Principal office address MUST BE A STREET ADDRESS)

c/o 8 1/2 CAFFE' & BOTTEGA

1717 North Bayshore Drive- THE GRAND, Suite 109

Miami, Florida 33132

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

c/o 8 1/2 CAFFE' & BOTTEGA

1717 North Bayshore Drive- THE GRAND, Suite 109

Miami, Florida 33132

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:

RGPA Registered Agent, Corp.

New Registered Office Address:

2601 South Bayshore Drive, Suite 725

Enter Florida street address

Miami

Florida 33133

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 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 Changing Registered Agent, Signature of New Registered Agent

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:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	ROBERTO CALANCHI	1717 N. Bayshore Drive	<input type="checkbox"/> Add
		THE GRAND 3932	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33132	
MGR	ROBERTO CALANCHI	2601 S. Bayshore Dr.	<input checked="" type="checkbox"/> Add
		Suite 725	<input type="checkbox"/> Remove
		MIAMI, FL 33132	
MGRM	PATRIZIA BAGNOLINI	1717 N. Bayshore Drive	<input type="checkbox"/> Add
		THE GRAND 3932	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33132	
MGR	PATRIZIA BAGNOLINI	2601 S. Bayshore Dr.	<input checked="" type="checkbox"/> Add
		Suite 725	<input type="checkbox"/> Remove
		MIAMI, FL 33132	
MGR	MASIEL PEREZ	2601 S. Bayshore Dr.	<input checked="" type="checkbox"/> Add
		Suite 725	<input type="checkbox"/> Remove
		MIAMI, FL 33132	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

CALABRESSE
 2013 OCT 28 11:41 AM
 0001

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

Dated October 18, 2013

Roberto Calanchi

Signature of a member or authorized representative of a member

ROBERTO CALANCHI

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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ALLIANCE STATE FIDELITY