## L13000 150510

Office Use Only



500287926255

07/18/16--01036--027 \*\*25.00

16 JUL 18 PH 12: 09
SECREPSIVE STATE

J. HARRIS

## CHRISTOPHER P. KELLEY, P.A.

TELEPHONE (305) 893-6004 FACSIMILE (305) 893-7666 M

ATTORNEY AT LAW 11098 BISCAYNE BOULEVARD SUITE 205 MIAMI, FLORIDA 33161

EMAIL ADDRESS INFO@CPKLAWPA.COM

July 12, 2016

Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

RE: AMENDMENT to ARTICLES OF ORGANIZATION

NAME OF LLC: SLISE LLC
DOCUMENT NUMBER: L130001550510

Dear Madam or Sir:

Enclosed please find my check for \$25.00 and an original and one(1) copy of Amendment to Articles of Organization of Slise LLC, a Florida limited liability company, amending the Authorized Person(s) to manage the company.

Please return a confirmation of filing the **Amendment to Articles of Organization** for the said limited liability company to my office.

Thank you for your cooperation.

Very truly yours,

CHRISTOPHER P. KELLEY

CPK:rd Enclosures \$ 25.00 Amendment 30.00 w/cert copy 5.00 w/Cert of Status

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

SLISE LLC							
( <u>Name of the Limited Liability Con</u> (A Florida Limit	npany as it now appears on our record ed Liability Company)	<u>s.</u> )					
The Articles of Organization for this Limited Liability Compa	ny were filed on October 25, 2013	and assigned					
Florida document number L130001550510							
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the limited li	ability company here:						
N/A							
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC	" or the abbreviation "L.L.C."					
Enter new principal offices address, if applicable:	N/A						
(Principal office address MUST BE A STREET ADDRESS)		SEC.					
Enter new mailing address, if applicable:	N/A	Ta 🗜 :11					
(Mailing address MAY BE A POST OFFICE BOX)		11.5 12. D					
		0.0 RND RND					
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		s, enter the name of the n					
Name of New Registered Agent:							
New Registered Office Address:	77 ( 27) 1 1 ( 7)						
	Enter Florida street address						
	, Flo	orida Zip Code					
New Registered Agent's Signature, if changing Registered Age	, and the second se	Zip Code					

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
MGRM	LISA J. HEYECK	658 NE 94 Street	Add
		MIAMI, FL 33138	<b>■</b> Remove
			☐ Change
MGR	SEAN M. LATTERNER	7737 NE 8 Avenue	Add
		Miami, FL 33138	☐ Remove
			■ Change
		·	Add
			Remove
		<del> </del>	Change
			Add
		<del></del> .	Remove
			Change
			Remove
			□ Change □ Rdd
			□ Remove
			☐ Change

N/	ding any other informat /A							
	,		<u> </u>			· · · · · · · · · · · · · · · · · · ·	·	-
_								_
		<u>.</u>		·				_
								-
_								-
_		<del></del>						_
-					,			_
								-
								_
					· .			_
	·		a					_
_					•			_
								-
_		<del></del>			· · · · · · · · · · · · · · · · · · ·			_
_								_
								_
fectiv	e date, if other than the	date of filing:			(options	ıl)		
an effec	tive date is listed, the date must	be specific and car	nnot be prior to date	of filing or more tha	n 90 days after fili	ng.) Pursua	nt to 60	5.020
ote: 11 ocumer	f the date inserted in this blo nt's effective date on the De	partment of State	t the applicable st e's records.	atutory ming requ	irements, this da	ite wili no	t de iis	ted as
	rd specifies a delayed		e, but not an	effective time,	at 12:01 a.m	ı. on the	e earl	ier o
ine 9	Oth day after the reco	rd is filed.						
	7/11/2016		2016			, part 0		
**	77117000	, <u> </u>	·			ĒË	නි	
ited _	7 1						*******	
ated _	7/11/2016	Litto		·		注照	$\subseteq$	ij Grafita
ated _		Signature of a men	nber or authorized i	representative of a m	ember	AHASS	8	e cress
 ated _	- Juni 1		nber or authorized i	representative of a m	ember			European B Francisco C C C C C C C C C C C C C C C C C C C
ated _		<b>t</b>	mber or authorized i		ember	30 E	UL 8 PHI	

Page 3 of 3

Filing Fee: \$25.00