## 14000034519

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(City	//State/Zip/Phone	e #)
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## COVER LETTER

TO: Registration S Division of Co			
	COLONN	A RE LLC	
SUBJECT:		nited Liability Company	ann ann ann ann an Ann के प्रत्य कर कर कर कर कर किया है है जिस कर
The enclosed Articles of	Amendment and fee(s) are sub	omined for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	GIA	COMO BOSSA	
	— property of the second second page 200 and 400 and 500 and 5	Name of Person	magamagang (ng nggyagg ng agus girtaga liibh ku dhiminki)
	MORI	S & ASSOCIATI	ES
	in the time of the transfer to the same state - a set to be the state to the same to the same to the same	Firm/Сотряну	and a maker of the raw when you appear with the property and property and a second
	3650 NW	82nd AVE, SUIT	E 401
	and the second of the second company of the second	Address	A Marie Andrewson Andrewso
	DC	DRAL, FL 33166	3
		City/State and Zip Code	
	gb	ossa@anmpa.com w be used for future annual report notif	ication)
For further information of	concerning this matter, please o		2
	•		600
Name o	of Person	at (305) 559-1	Telephone Number
Enclosed is a check for the	he following amount:		
<b>□ \$25.00</b> Filing Fce	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Fiting Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ING ADDRESS:	STREET/COURU Registration Section	

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

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Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahasaee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COLONNA	KELLU	inė (s. napasas sas, paragas pie samanas m. s. na nas yra manasanas m		
(Name of the Limited Liability Con (A Florida Limite	apatry as it new appear al Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liability Comparition of L14000034519			and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited li-	ability company he	re:		
The new name must be distinguishable and end with the words "Limited L	7.1.11	J. Commission of T. C.W. and the letter		2
The new haine must be distinguishable and end with the words "Limited L	mmny Company, the c	resignation tite, of the ano-	reviation Table.	<u></u>
Enter new principal offices address, if applicable:	m den was filipan a geniner in in	The state of the s		4
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	mather-trease is as a compact of the contract			<u>_</u>
			1	
		10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	712 (	-1
Enter new mailing address, if applicable:	a manager was not be only a supplying the Addition	refrired a came may support of \$1000 and the same mane as me. It has		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	a one para spirantial and the birth	# Compression Control of the Control	123 7 4 4 123 7 4 4 100 100 100 100 100 100 100 100 100 100	<u></u>
		t o d to be a final statement with the contract of the property and the contract of the contra		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address have of New Registered Agent:	ere:	our records, <u>enter th</u> ASSOCIATES		e nev
•				
New Registered Office Address:	3650 NW 82nd AVE, SUITE 401  Enter Florida sirea address			
			22166	
- Carrier terms the state of the	Citi	, Florida	Zw Code	*****
New Registered Agent's Signature, if changing Registered Agen	_		<i>(</i>	
I hereby accept the appointment as registered agent and a	<del>-</del>	ongotty I further ourse	t to consilu wit	la elsa
л неголу певар то прумнинене из годинегой аден ана и	gree ar ar a ar and c	аракау, азигика идоо	o to compay wit	A THC

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = M AMBR = A	lanager authorized Member		
Title	Name	Address	Type of Action
MGR REMIDA MANAGEMENT LLC 2961 15		2961 1ST AVENUE NORTH, SUITE	F ■ Add
		ST PETERSBURG, FL 337	13 Remove
AMBR	EMILIO COLONNA	VIA COLLEPASSO 28	
		ROME, RM 00133 IT	Remove
			Add Remove
			CJ Add
			□ Remove
+2,49 milidanosydallisissa	I falls of the control of the desired in the control of the state of the control		CD Add
			□ Remove

ng any other informatio	on, enter change(s) here: (Attach additional sheets, if necessary.)	
,	TO SECURE AND	
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June 24	2014	
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Filing Fee: \$25.00