#L15000058807

(Re	questor's Name)	
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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SLORITARY OF STATE

K.SALY EXAMINER JUN 25 2015

COVER LETTER

то	: Registration Se Division of Cor	ction porations		
CI	7380 Prope			
SUI	вјест:		ited Liability Company	
The	enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Plea	ase return all correspo	ndence concerning this matter	to the following:	
		Elizabeth M. Delgado		
•		-	Name of Person	
		7380 Properties LLC		
			Firm/Company	
		7380 N.W. 77th Court		
			Address	
		Miami, FL 33166		
			City/State and Zip Code	
		tere@delantconstruction.com		()
For	further information co	oncerning this matter, please ca	to be used for future annual report notificall:	cation)
Ter	resa Perera		305 592-2223	
	Name o	f Person	at ()	Telephone Number
Enc	closed is a check for th	ne 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**

2015 JUN 23 PM 5: 07

7380 Properties LLC

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

	(A Fiorida Dillined Dablity	• • • •	SEE, FLORING
he Articles of Organization for this Limited	Liability Company were fil	led on April 2, 2015	and assigned
orida document number L15000058807			
nis amendment is submitted to amend the fo	lowing:		
If amending name, enter the new name	of the limited liability cor	mpany here:	
/A			
e new name must be distinguishable and contain the	words "Limited Liability Comp	pany," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if appli	cable: N/A		
<u>rincipal office address MUST BE A STRE</u>	ET ADDRESS)		
			, , , 414
nter new mailing address, if applicable:			
<u>Mailing address MAY BE A POST OFFICI</u>	<u></u>		
B. If amending the registered agent and egistered agent and/or the new registered. Name of New Registered Agent:	9	dress on our records,	enter the name of the
Hame of thew Registered Agent.	NI/A		
New Registered Office Address:	N/A	Enter Florida street address	
	<u> </u>	, Flo	ridaZip Code
	City	i,*	гір Соде

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>	<u>Address</u>	Type of Action
AMBR	Juan M. Delgado	7380 N.W. 77th Court	
		Miami, FL 33166	Remove
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fective date, if other than effective date is listed, the ote: If the date inserted in ocument's effective date o	date must be specif this block does	ic and cannot be price not meet the apple	or to date of filing or icable statutory fil	more than 90 days aft	er filing.) Pursuant to 6	05.0207 (i sted as th
e record specifies a d The 90th day after t			ot an effective	time, at 12:01	a.m. on the ear	lier of:
June 18		2015				
		John	_			
\ \	Munn	1 Charles	horized representati			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00