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COVER LETTER

	sion of Cor					
SUBJECT:	Latin House Pinecrest LLC					
Sebace		Name of Lim	ited Liability Company			
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Ray Garcia				
	Articles of Amendment and fee(s) are submitted for filing. Ray Garcia Name of Person Law Office of Ray Garcia, P.A. Firm/Company 14850 SW 26th Street, Suite 204 Address Miami, Florida 33185 City/State and Zip Code rgarcia@raygarcialaw.com E-mail address: (to be used for future annual report notification) promation concerning this matter, please call:					
		Law Office of Ray Garcia,	P.A.			
			Firm/Company			
		14850 SW 26th Street, Sui	te 204			
			Address			
		Miami, Florida 33185	•			
			City/State and Zip Code			
		E-mail address: (to be used for future annual report notific	ation)		
For further in	formation co	oncerning this matter, please ca	all:			
Ray Garcia			,			
	Name of	Person	Area Code Daytime	Telephone Number		
Enclosed is a	check for th	e following amount:				
■ \$25.00 Fi	ling 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

Latin House Pinecrest LLC		
(Name of the Limited L (A F	iability Company as it now appears on our records.) lorida Limited Liability Company)	
he Articles of Organization for this Limited Liabil	ity Company were filed on 08/29/2016	and assigned
orida document number L16000161513	·	<u>_</u>
nis amendment is submitted to amend the following	ng:	
If amending name, enter the new name of the	e limited liability company here:	
fadlove Pinecrest LLC		•
e new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" o	the abbreviation "L.L.C."
nter new principal offices address, if applicable	<u> </u>	
<u>rincipal office address MUST BE A STREET A</u>	DDRESS)	
		······································
nter new mailing address, if applicable:		
<u> </u>	Δ	
	· · · · · ·	
. If amending the registered agent and/or	registered office address on our records	enter that name of the
egistered agent and/or the new registered office		sitter the name or the
		558 7
•		
Name of New Registered Agent:		CO = 1 4 miles
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
		0 2 2
-	, Flori	
	City	Zip Sode

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 = M $AMBR = A$	lanager uthorized Member	•	
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
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