

L17000208436

Florida Department of State
Division of Corporations
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To: Division of Corporations
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From: Account Name : SIEGELAUB, ROSENBERG, GOLDING & PELLER, P.A.
Account Number : 119990000050
Phone : (954) 753-2222
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Crystal @siegelaub.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LASANTE, LLC

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2018 MAR 20 AM 11:07
DEPARTMENT OF STATE
DIVISION OF CORPORATION
TALLAHASSEE, FLORIDA

J. LEGGETT
MAR 21 2018

18 MAR 20 PM 10:14

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LASANTE, 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 10/10/2017 and assigned Florida document number L17000208436

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 contain 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)

1155 BRICKELL BAY DRIVE SUITE 1202 MIAMI, FL 33131

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1155 BRICKELL BAY DRIVE SUITE 1202 MIAMI, FL 33131

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:

MARIA A GIRIBONE

New Registered Office Address:

1155 BRICKELL BAY DRIVE STE 1202

Enter Florida street address

MIAMI

City

Florida 33131

Zip Code

New Registered Agent's Signature, if changing Registered Agents:

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.

Handwritten signature of Maria A. Giribone

If Changing Registered Agent, Signature of New Registered Agent

Handwritten number: 1180000600013

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>	<u>Type of Action</u>
MGRM	CARLA SANJINES	540 BRICKELL KEY DRIVE	<input type="checkbox"/> Add
		SUITE 1617	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33131	<input type="checkbox"/> Change
MGRM	ALFONSO VICTOR GIRIBONE	1155 BRICKELL BAY DRIVE	<input checked="" type="checkbox"/> Add
		SUITE 1202	<input type="checkbox"/> Remove
		MIAMI, FL 33131	<input type="checkbox"/> Change
MGRM	MARIA A GIRIBONE	1155 BRICKELL BAY DRIVE	<input type="checkbox"/> Add
		SUITE 1202	<input type="checkbox"/> Remove
		MIAMI, FL 33131	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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