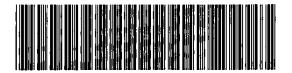
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T. HAMPTON

EXAMINER

8EH # 4 5011

# **COVER LETTER**

orporations		•
640	3 FID, LLC	
f Amendment and fee(s) are sul	bmitted for filing.	
ondence concerning this matter	r to the following:	
	Julianna Castro	
	Name of Person	
	6403 FID, LLC	
	Firm/Company	· · · · · · · · · · · · · · · · · · ·
1450 E	Brickell Avenue, Suite 1400	
	Address	<del> </del>
1	Miami, Florida 33131	
	City/State and Zip Code	
F-mail address: (	ulicabe@hotmail.com	ration)
		dutony
concerning this matter, piease (	an.	
lianna Castro	at \	978-0977
of Person	Area Code & Daytime Telephone Number	
the following amount:		
\$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)
	Amendment and fee(s) are sultondence concerning this matter  E-mail address: (  concerning this matter, please of the following amount:	6403 FID, LLC  Name of Limited Liability Company  If Amendment and fee(s) are submitted for filing.  Ondence concerning this matter to the following:  Julianna Castro  Name of Person  6403 FID, LLC  Firm/Company  1450 Brickell Avenue, Suite 1400  Address  Miami, Florida 33131  City/State and Zip Code  julicabe@hotmail.com  E-mail address: (to be used for future annual report notification for person  at (305)  Area Code & Daytime  the following amount:

### MAILING ADDRESS:

TO:

Registration Section

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

FILED

OF	2011 SEP 21 PM 12: 03
6403 FID. LLC	SECRETARY OF STATE
(Name of the Limited Liability Company as it now appea (A Florida Limited Liability Company)	ars on our recorus.)

The Articles of Organization for this Limited Liabili	ty Company were filed on _	August 2nd, 2011	and assigned
Florida document numberL11000088510	<u>)                                    </u>		
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company h	<u>ere</u> :	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Com	pany," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AL	ODRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	2		
B. If amending the registered agent and/or re registered agent and/or the new registered office a		our records, enter the	name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	City	, Florida	Zip Code
	cuy		zip Coae

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

MGR = Manager

MGRM = Managing Member Title Name 1 Address Type of Action **MGRM** Javier Heuser 1450 Brickell Avenue, Suite 1400 ✓ Remove Miami, Florida 33131 Julianna Castro MGR 1450 Brickell Avenue, Suite 1400 Miami, Florida 33131 ☐ Add ☐ Remove ☐ Add Remove  $\square$ Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 16th 2011 ignature of a member or authorized representative of a member Julianna Castro

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00