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(Cit	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nam	e)		
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

в. возтіск JUL **- 3** 2012

EXAMINER

*1 ...

COVER LETTER

TO: Registration Se Division of Cor	ection porations	•	
SUBJECT:	FORT DALLAS T	RUSS COMPANY, LLC.	
SUBJECT.		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	bmitted for filing,	
Please return all correspond	ondence concerning this matter	r to the following:	
		Rene F. Leoncio	
		Name of Person	
	Leo	oncio & Associates, LLC.	
		Firm/Company	
	8302 North	hwest 103rd Street, Suite # 106	
		/100/655	
	Hiales	eh Gardens, Florida 33016 City/State and Zip Code	
	rio	eoncio@bellsouth.net	
	E-mail address: (
For further information of	concerning this matter, please of	call: at (305) 558-1700	-11
	ne F. Leoncio	at (305) 558-1700 SS	
Name o	f Person	Area Code & Daytime Telephone Number	TT.
Parales de la la companya de la comp	L. C. T.	Area Code & Daytime Telephone Number	The sale
Enclosed is a check for the	v		
▼\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certificate Copy (additional copy is enclosed) Certificate of Status & Certificate Copy (additional copy is enclosed)	
Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assec, FL 32314	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

06/26/2012 10:01

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FORT DALLAS TRUS	S COMPANY, LLC.
(Name of the Limited Liability Compan (A Florida Limited Li	y <u>as it now appears on our records.</u>) ability Company)
The Articles of Organization for this Limited Liability Company	
Florida document numberL11000101069	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	hty company here:
<i>N/A</i>	
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	AMERIA
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MASSELVIFLO
	100
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	ice address on our records, enter the name of the new
Name of New Registered Agent:	A)A
New Registered Office Address:	Enter Florida street address
•	City Zip Code

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.

MGR = Manager

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:

MGRM = Managing Member					
<u>Title</u>	<u>Name</u>	Address	Type of Action		
MGRM	Jose M. Menendez	7035 Southwest 44th Street Miami, Florida 33155	Add ☑ Remove		
MGRM	Jose Vazquez Blanco	7035 Southwest 44th Street Miami, Florida 33155	Add ☐ Remove		
· <u>-</u>			□ Add □ Remove		
			Add Remove		
			Add Remove		
		·	Add Remove		
D. If amend	ling any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	12 JUN 29 AM SEURGIANI OF TALLAHASSEE, F		
 Dated	July 20th 201	2	6: 22 STATE CLORIDA		
	Signature of a member of the state of the st	or authorized representative of a member			

Page 2 of 2

Filing Fee: \$25.00