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DIVISION OF CORPORATIONS
2012 SEP 24 PH >: 08

C. LEWIS

SEP 2 5 2012

EXAMINER

Registration Section TO: **Division of Corporations** SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Rame of Person Firm/Company 21 SE 1st Avenue 10th Moor Miami Fonda 33131
City/State and Zip Code PAOLA @ ISANICHYUNDAI. COM
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: PAOLA CASTILLO RIBON at (305) 416-0202

Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$25.00 Filing Fee \$30.00 Filing Fee & 7\$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT

• TO 1

ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE DIVISION OF CORPORATION

Zip Code

MINT APARTMEA	vas it now appears on our records.) 2012 SEP 24 PM 2:
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company Florida document number	,
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and end with the words "Limite"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)	999 BLICKELL AVENUE PENTHOUSE 1101 MIAMI, FIORIDA 33131
	PENTHOUSE 1101
	•
Enter new mailing address, if applicable:	PENTHOUSE 1101
(Mailing address MAY BE A POST OFFICE BOX)	PENTHOUSE 1101
	MIAMI FLORIDA 33131
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:	ce address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager MGRM = Managing Member				
<u>Title</u>	Name	Address	Type of Action	
MGR	PAOLA CASTILLO LIBON	999 Brickell treme Perthouse 1101 Miami, Florida 33131	Add Remove	
			Add Remove	
			Add Remove	
			Add Remove	
			Add Remove	
			Add Remove	
D. If amend 	ing any other information, enter change(s	s) here: (Attach additional sheets, if necessary.)	\$ 5015 \$ 01810	
			FILED STATE SECRETARY OF STATE OF CORPORATIONS 2012 SEP 24 PM 2: 08	
Dated	Signature of a member or	UTHORIZED REPRESENTATIVE authorized representative of a member URD TOLEDD		

Page 2 of 2

Filing Fee: \$25.00