

LO7006113476

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

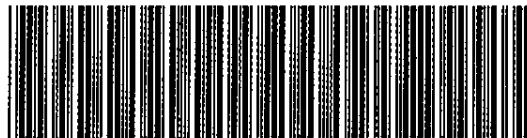
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **BANF OF FLORIDA LLC**

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:

ERICK MAGNO

Name of Person

ERICK MAGNO, PL

Firm/Company

1401 BRICKELL AVE, SUITE 520

Address

MIAMI, FL 33131

City/State and Zip Code

Marcie@magnolaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARCIE GREGORIO

Name of Person

305 379-4400

at ()

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing 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

mv

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BANF OF FLORIDA 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 2/08/2012 and assigned
Florida document number L07000113476.

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 end with 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)

1401 BRICKELL AVENUE

SUITE 520

MIAMI, FL 33131

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1401 BRICKELL AVENUE

SUITE 520

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida

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.

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

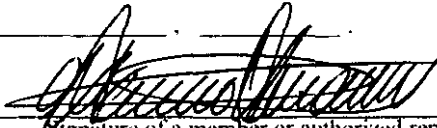
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	BANF FINANCE INC	25 SE 2ND AVE, STE 1235	☐ Add
		MIAMI, FL 33131	☒ Remove
MGR	MARCIA MONTOYA	1401 BRICKELL AVENUE	☒ Add
		SUITE 520	☐ Remove
		MIAMI, FL 33131	
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
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			☐ Remove
			☐ Add
			☐ Remove

13 DEC 31 11 3:30
TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

PLEASE AMEND PRINCIPAL, MAILING AND MANAGER
ADDRESS TO 1401 BRICKELL AVENUE, SUITE 520
MIAMI, FL 33131

Dated _____



Signature of a member or authorized representative of a member

Mauro Vinocar

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

13 DEC 31 AM 3:30
CLERK OF COURT
TALLAHASSEE FLORIDA