L05000058363

(Re	questor's Name)	
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ALL ANASSEE, FLORIDA

G. HARVEY

DEC 09.

EXAMINER

COVER LETTER

TO:			n Secti Corpo	on rations					
SUBJEC	_т. F	loig,	Tuta	n, Rosenberg, Martii	n, Stoller, Zumpano & Bellido,	LLC			
SOBJEC	···		•	Name of Li	mited Liability Company				
The encl	osed A	rticle	s of An	nendment and fee(s) are su	bmitted for filing.				
Please re	eturn al	l corr	espond	ence concerning this matte	r to the following:				
				Carlos A. Zumpano					
					Name of Person				
				Zumpano Castro, L	LC				
					Firm/Company				
				500 South Dixie High	ghway, Suite 302				
					Address				
				Coral Gables, Flori	da 33146		35.65	14	
					City/State and Zip Code			930	
				carlos.zumpano@zu	umpanocastro.com (to be used for future annual report notifica	4:	SSY	1	
For furth	er info	rmati	on con	cerning this matter, please	•	tion)	KEOF :	P	j
Carlos	s A. Z	ump	ano		305 503-2991		STATE	87:2	*****
		Na	me of Po	erson		elephone Number			
Enclosed	d is a cl	neck f	for the t	ollowing amount:					
■ \$25.	00 Fili	ng Fe	e	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Fili Certificate Certified ((additional c	e of Status Copy		

MAILING ADDRESS:

TO:

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 OF

Roig, Tutan, Rosenberg, Martin, Stoller, Zumpano & Bellido, 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 Florida document number L0500058363	Company were filed on 6/13/200	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
Zumpano Castro, LLC		
The new name must be distinguishable and end with the words "I	Limited Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	
		글래 물 '자'
	 	CA TO PRINCE
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		700 10
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
		756 CO
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		ecords, enter the name of the new
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 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			□ Add
			Remove
			.□ Add
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			Actor (S)
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ective date, if other than the d effective date must be specific, cannot date this document is filed by the Flor	late of filing: the prior to date of receipt or filed date and cardida Department of State)	(optional) nnot be more than 90 days after
	2014	•

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Filing Fee: \$25.00