L15000/19017

(Re	equestor's Name)	-		
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SECRETARY OF STATE

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COVER LETTER

TO:	Registration Sec Division of Cor					
SURI	1471 SW 13	38 PL 1, LLC				
SUBJECT: Name of Limited Liability Company						
The en	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspo	ndence concerning this matter	to the following:			
		Fernando J. Grullon				
			Name of Person	 		
		1471 SW 138 PL 1, LLC				
		<u> </u>	Firm/Company			
		14452 SW 155 Place				
			Address	·		
		Miami, FL 33196				
			City/State and Zip Code			
		ternando@fjgrealtor.com	to be used for future annual report notifi	action		
For fu	rther information c	oncerning this matter, please ca		Callony		
	ndo J. Grulion	,	305 613-0708 at () Daytime			
	Name of	f Person	Area Code Daytime	Telephone Number		
Enclos	sed is a check for th	ne following amount:				
= \$2	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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1471 SW 138 PL 1, 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 $\frac{7/10/2015}{1}$ and assigned Florida document number L15000119017 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 14715 SW 138 PL 1, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member					
<u>Title</u>	Name	Address	Type of Action		
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			Change		
			□ Add		
			Remove		
		***************************************	Change		
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f amending any other inform	ation, enter	cnauge(s) n	ere. (Anaci	i additionai s	meets, ij nece	ssary.)	
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ffective date, if other than the an effective date is listed, the date motor: If the date inserted in this ocument's effective date on the	ust be specific a block does no	and cannot be pot meet the app	olicable statut			filing.) Pursuant to 605	
e record specifies a delaye The 90th day after the re			not an effe	ective time,	at 12:01 a	.m. on the earli	er o
ated July 21	<u> </u>	_, 2015	·			15 JUL SECRE	n
Peml	Signature of	f a member or a	uthorized repre	sentative of a n	nember	PANY PANY	
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Fernando J. Grullon			rinted name of			- CR 2: 0	

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Filing Fee: \$25.00