L15000125612

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COVER LETTER

Division of Cor					
SUBJECT:	1113 W	AVERLY, LLC			
30B0ECT:		ed Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	PE ⁻	ΓER A. BLANCO, ES	Q.		
	Name of Person				
	LAW OFFICES OF PETER A. BLANCO, PA				
	Firm/Company				
	7700 N KENDALL DRIVE, SUITE 601				
		Address			
	MIAMI, FLORIDA 33154				
	City/State and Zip Code				
	PAB@PABLAWPA.COM E-mail address: (to be used for future annual report notification)				
For further information	concerning this matter, please of	•	,		
	, , , , , , , , , , , , , , , , , , ,				
	ER A. BLANCO	at (_305)	271-6		
Name	of Person	Area Code &	Daytime Teleph	ione 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 e	enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MAII	LING ADDRESS:	STREET/	COURIER AD	DDRESS:	

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED

2015 AUG -3 AM II: 06

SECTETARY OF STATE TALLAHASSEE, FLORIDA

Ziv Code

1113 WAVERLY, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) July 22, 2015 and assigned The Articles of Organization for this Limited Liability Company were filed on L15000125612 Florida document number _____ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A 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) N/A 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: N/A 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 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 = Mai MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMGR	PEDRO A. BLANCO	8585 SUNSET DRIVE, SUITE 105, MIAMI, FL 33143	Add Remove
MGRM	VBC INVESTMENTS, LTD	8585 SUNSET DRIVE, SUITE 105, MIAMI, FL 33143	Add ☐ Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ding any other information, enter chan	age(s) here: (Attach additional sheets, if necessary.,	
	N	I/A	MIS AUG -3 AF
			MIN: 06
Dated	JULY 30	2015	
	Signature of a memb	per or authorized representative of a member	
		EDRO A. BLANCO	
	Турс	ed or printed name of signee	

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Filing Fee: \$25.00