

L13000149390

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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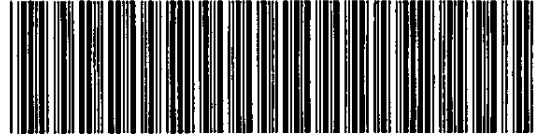
(Business Entity Name)

(Document Number)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: VISTA LATINA TECHONOLOGIES, 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:

JUAN VICENTE URDANETA

Name of Person

JUAN VICENTE URDANETA, P.A.

Firm/Company

2655 S. LE JEUNE ROAD SUITE 522

Address

CORAL GABLES, FLORIDA 33134

City/State and Zip Code

JVUR@AOL.COM

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

For further information concerning this matter, please call:

JUAN VICENTE URDANETA

305 728-1319
at ()

Name of Person

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

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

VISTA LATINA TECHNOLOGIES, 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 10/23/2013 and assigned
Florida document number L13000149390.

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 contain 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) _____

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

_____, 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 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	<u>Darwin Morales</u>	2655 S. LE JEUNE ROAD	☒ Add
		SUITE 522	☐ Remove
		CORAL GABLES, FL 33134	☐ Change
AMBR	<u>Carlos Tilac</u>	2655 S. LE JEUNE ROAD	☒ Add
		SUITE 522	☐ Remove
		CORAL GABLES, FL 33134	☐ Change
AMBR	<u>JORDAN DAVILA</u>	2655 S. LE JEUNE ROAD	☒ Add
		SUITE 522	☐ Remove
		CORAL GABLES, FL 33134	☐ Change
AMBR	<u>JOSE DAVILA</u>	2655 S. LE JEUNE ROAD	☒ Add
		SUITE 522	☐ Remove
		CORAL GABLES, FL 33134	☐ Change
AMBR	<u>LAURA RODRIGUEZ</u>	2655 S. LE JEUNE ROAD	☒ Add
		SUITE 522	☐ Remove
		CORAL GABLES, FL 33134	☐ Change
AMBR	<u>RENE MONTILVA</u>	2655 S. LE JEUNE ROAD	☒ Add
		SUITE 522	☐ Remove
		CORAL GABLES, FL 33134	☐ Change

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AMBR OSWALDO SALAZAR 2655 S. LE JEUNE ROAD ADD
SUITE 522
CORAL GABLES, FL 33134

AMBR LENNIN CARO 2655 S. LE JEUNE ROAD ADD
SUITE 522
CORAL GABLES, FL 33134

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DEPARTMENT OF STATE
HALL WASHINGTON, D.C.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 10/16/2015

CARLOS TILAC

Typed or printed name of signee