## LC100002633

(Re	questor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

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20 MAY 18 FH 3: 50



## **COVER LETTER**

TO: Registration Se Division of Cor			ر. دع	, sign
CRISCORE			O. T. S.	
SUBJECT:		led Liability Company		
	Name of Limit	led Liability Company	Ų	3
	Amendment and fee(s) are submedence concerning this matter t			18 PM 3:50
	ALVARO CORREA			
		Name of Person	<del></del> _	
		Firm/Company		
	2201 N COMMERCE PKV	VΥ		
		Address	<u> </u>	
	WESTON, FL 33326			
		City/State and Zip Code	<del></del>	
	NEWREALTY@HOTMAII	L.COM to be used for future annual report notifi	cation	
The Complement of Commences	concerning this matter, please ca		canon	
	concerning this matter, piease ea			
ALVARO CORREA		954 659-8901 at ()		
Name o	nf Person	Area Code Daytime	Telephone Number	
Enclosed is a check for t	he following amount:			
S25.00 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 Addre Registration Division of G P.O. Box 63	Section Corporations	Street Address: Registration Sec Division of Corp The Centre of T	porations	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

20 MAY 18 CH 3:50

CRISCORR, L.L.C.

(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 Lia	hility Company were filed on 02/16/2001	and assigned
Florida document number L01000002633		and distigrice
This amendment is submitted to amend the follow		
A. If amending name, enter the new name of t	the limited liability company here:	
The new name must be distinguishable and contain the woo	rds "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B  B. If amending the registered agent and/or regagent and/or the new registered office address  Name of New Registered Agent:	gistered office address on our records, o	
New Registered Office Address:	Enter Florida street	nd leave
	City	Florida
New Registered Agent's Signature, if changing Re		
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the re company has been notified in writing of this c	r and complete performance of my duti- tered agent as provided for in Chapter ( egistered office address, I herehy confu	es, and I am familiar with and 605, F.S. Or, if this document is

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>	Address	Type of Action
MGR	ALVARO CORREA	2201 N COMMERCE PKWY	<b>≅</b> Add
		WESTON, FL 33326	□Remove
			□Change
AMBR MARIA CORREA	MARIA CORREA	2201 N COMMERCE PKWY	<b>≘</b> Add
	WESTON, FL 33326	□Remove	
			Change
RA JOE A. CATARINEAU., ESQ	91750 OVERSEAS HWY	□Add	
	TAVERNIER, FL 33070	■Remove	
			Change
		□Add	
			□Remove
	<del></del>	□Change	
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Note:	ive date, if other than the date of filing:  (optional)  ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
record is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Sato.!	·
zaicu	
	C9/111
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00