

LD2000014911

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L. SELLERS

To:

Division of Corporations
Fax Number : (850) 617-6383

SEP -1 2009

EXAMINER

From:

Account Name : FASTKIT CORPORATE OUTFITS
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**ARCHIE'S BRICKELL, LLC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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| Page Count | 03 |
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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA****09 AUG 31 AM 8:23****FILED**

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

ARCHIE'S BRICKELL, 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 06/14/02 and assigned Florida document number L02000014911

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 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**)

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

5600 SW 135th AVE, SUITE 202-A

MIAMI, FL 33183

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:

GABRIEL S. DIAZ-SARMIENTO, CPA

New Registered Office Address:

5600 SW 135th AVE, SUITE 202-A

Enter Florida street address

MIAMI

Florida

33183

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 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.

If Changing Registered Agent, Signature of New Registered Agent

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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 = Manager

MGRM = Managing Member

| Title | Name | Address | Type of Action |
|-------|--|---|--|
| VPS | Diaz-Sarmiento, Gabriel S. | 5600 SW 135th AVE, SUITE 202-A MIAMI, FL 33183 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| MGR | Restrepo Diana | 7275 NW 12 STREET MIAMI, FL 33126 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| MGRM | Restrepo Diana | 7275 NW 12 STREET MIAMI, FL 33126 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| MGRM | MALDONADO, IGNACIO LATIN CARIBBEAN RESORT INC. | 7275 NW 12 STREET MIAMI, FL 33126 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| MGRM | NARITA INVESTMENTS INCORPORATED. | 5600 SW 135th AVE, SUITE 202-A MIAMI, FL 33183 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| MGRM | | 5600 SW 135th AVE, SUITE 202-A MIAMI, FL 33183 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

SEE ATTACHMENT ON PROFIT AND LOSSES.

Dated August 28

2009

Signature of a member or authorized representative of a member

GABRIEL S. DIAZ-SARMIENTO

Typed or printed name of signer

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PROFITS AND LOSSES

Profit Distribution. The members shall be entitled to the net profits arising from the operation of the limited liability company business, that remain after the payment of the expenses of conducting the business activity of the limited liability company. Each member shall be entitled to a distributive part of the profits as follows:

| | |
|---------------------------------|------|
| LATIN CARIBBEAN RESORT INC | 100% |
| NARITA INVESTMENTS INCORPORATED | 0% |

The distributive part of the profits shall be determined and paid to the members each year on the anniversary date of the commencement of business of the limited liability company, the month and day of the commencement date being the date of the filing of these Articles.

Losses. All losses that occur in the operation of the limited liability company business shall be paid out of the capital of the limited liability company and the profits of the business, or, if these sources are insufficient to cover such losses, by the members in same Profit Distribution percentages as established in this Article

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