

LO4 0000 10641

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

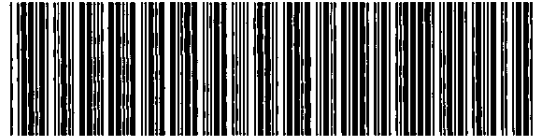
(Business Entity Name)

(Document Number)

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15 MAY 26 PM 4:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2015 MAY 26 AM 4:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 01 2015
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MARAVILLA FLOORS LC

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:

EDUARDO J FARIAS ORDONEZ

Name of Person

MARAVILLA FLOORS LC

Firm/Company

5600 N W 6 ST APT 7

Address

MIAMI, FL 33126

City/State and Zip Code

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

For further information concerning this matter, please call:

LEONOR M LEAL

305 860-9890

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 6, 2014

EDUARDO J FARIAS ORDONEZ
5600 NW 6 ST APT 7
MIAMI, FL 33126

SUBJECT: MARAVILLA FLOORS, LC
Ref. Number: L04000010641

We have received your document for MARAVILLA FLOORS, LC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

For a refund, you must include a written refund request including the name of the company, who the refund needs to be made payable to, where we need to mail it, and it needs to be signed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 714A00023813

2015 MAY 26 AM 4:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 11, 2014

EDUARDO J FARIAS ORDONEZ
5600 NW 6 ST APT 7
MIAMI, FL 33126

SUBJECT: MARAVILLA FLOORS, LC
Ref. Number: L04000010641

We have received your document for MARAVILLA FLOORS, LC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 514A00019479

2015 MAY 26 AM 4:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

MARAVILLA FLOORS, LC

(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 MARCH 1, 2015 and assigned
Florida document number L04000010641.

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)

5600 N W 6 ST APT 7

MIAMI, FLORIDA 33126

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5600 N W 6 ST APT 7

MIAMI, FLORIDA 33126

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2015 MAY 26 AM 4:32
TALAHASSEE, FLORIDA
SECRETARY OF STATE

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:

EDUARDO J FARIAS ORDONEZ

New Registered Office Address:

5600 N W 6 ST APT 7

Enter Florida street address

MIAMI

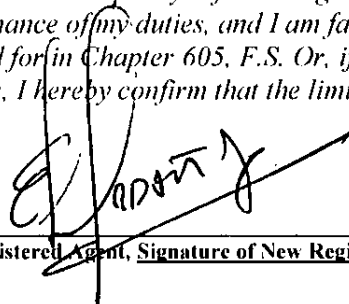
City

Florida 33126

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>
P	MARQUEZ, EFRAIN	11030 S W 52 DR	<input type="checkbox"/> Add
		MIAMI, FLORIDA 33165	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
VP	HIDALGO-GATO, MADELENE	11030 S W 52 DR	<input type="checkbox"/> Add
		MIAMI, FLORIDA 33165	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
P	FARIAS ORDONEZ, EDUARDO		<input checked="" type="checkbox"/> Add
		MIAMI, FLORIDA 33126	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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2015 MAY 26 PM 4:32
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 TALLAHASSEE, FLORIDA

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SECRETAR
TALLAHASSEE

2015 MAY 26


2015 MAY 26 AM 4:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1000

If the record 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 record is filed.

3/1/2018



Signature of a member or authorized representative

EDUARDO J FARIAS ORDONEZ

Page 3 of 3

Filing Fee: \$25.00