

L04000013266

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

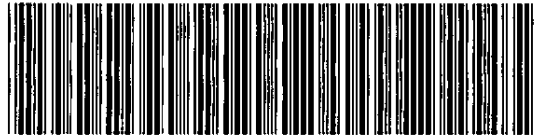
Special Instructions to Filing Officer:

L. SELLERS

JUL - 8 2009

EXAMINER

Office Use Only



800157454358

06/22/09--01025--019 **25.00

FILED
09 JUL - 7 PM 3:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Elená Vigil-Fariñas, Esq.

4160 West 16th Avenue
Suite 502
Hialeah, Florida 33012
Tel: 305-820-5858
Fax: 305-820-0299
Elena@evigilfarinas.com

103301 Overseas Highway
Suite B
Key Largo, Florida 33037
Tel: 305-451-3300
Fax: 305-453-3435

* Please, reply to the Key Largo address

June 3, 2009

Amendment Section
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

RE: Interamerica Data, Fla., LLC

Dear Sir/Madam:

The undersigned represents the above-listed corporation. Enclosed please find Articles of Amendment to Articles of Incorporation.

The amendment is the removal of one of the Mgrs, Bobbi Moren. This should take effect retroactive to September of 2008 when Ms. Moran's shares (5%) were purchased by the LLC.

We have enclosed our check for \$43.75 to cover the cost of filing and for a certified copy. As directed, we are enclosing an extra copy of the Articles of Amendment.

If you have any questions or comments with regard to the above, please feel free to contact me.

Cordially,


Elena Vigil-Fariñas, Esq.
EVF:bl

cc: Elena Ramos, Interamerica Data, Fla., LLC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Interamerica Data Fla, 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:

Elena Virgil-Farías, Esq.
Name of Person

Firm/Company

103301 Overseas Highway
Address

Key Largo, Fla. 33037
City/State and Zip Code

elena @ evirgilarias.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elena Virgil-Farías at (305) 457-3300
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

June 10, 2009

ELENA VIGIL-FARINAS, ESQ
4160 WEST 16TH AVENUE
STE. 502
HIALEAH, FL 33012

SUBJECT: INTERAMERICA DATA, FLORIDA, LLC
Ref. Number: L04000013266

We have received your document for INTERAMERICA DATA, FLORIDA, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 209A00019533



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 24, 2009

ELENA VIGIL-FARINAS ESQ.
103301 OVERSEAS HIGHWAY, STE. B
KEY LARGO, FL 33037

SUBJECT: INTERAMERICA DATA, FLORIDA, LLC
Ref. Number: L04000013266

We have received your document for INTERAMERICA DATA, FLORIDA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 609A00021534

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Interamerica Data Fla. 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 _____ and assigned
Florida document number 604000013266

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

na

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)

na

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

na

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:

na

New Registered Office Address:

Enter Florida street address

City, Florida

Zip Code

FILED
09 JUL - 7 PM 3:00
SECRETARY OF STATE
TALLAHASSEE 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.

If Changing Registered Agent, Signature of New Registered Agent

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
MGRM	Bobbi L. Moran	1307 Polo Club Road #C101 Wellington, Fla 33144	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

2/9

Dated

4/4

2009

Signature of a member or authorized representative of a member

Dena Vigil Torres, Esq.

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE FLORIDA

09 JUL -7 PM 3:00

FILED