

21-Sep-2017 12:18

PADRON AND ASSOCIATES INC

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9/6/2017

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : PADRON AND ASSOCIATES INC.
Account Number : I20060000156
Phone : (305)818-0404
Fax Number : (305)818-0898

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FOURDIAZ VARGAS LLC

Certificate of Status	0
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Help

K. SALY

SEP 22 2017

September 6, 2017

Division of Corporations
PO Box 6327
Tallahassee, FL 32314


RE: 4DV MARKETING "INC"
Document # P16000099362

Please be advised that I am the original incorporator, President and sole owner of the above entity, which was dissolved through the ARTICLES OF DISSOLUTION filed on September 5, 2017.

I am hereby relinquishing all my rights to the name 4DV MARKETING to FOUR DIAZ VARGAS LLC an entity for which I too am the Managing Member through AVACO HOLDINGS LLC for which I too am the Managing Member so that FOUR DIAZ VARGAS LLC may be able to change its name to 4DV MARKETING LLC through the attached ARTICLES OF AMMENDMENT.

Should anyone have any questions regarding these changes please direct them to my Registered Agent: PADRON & ASSOCIATES, INC. – Attention: RALPH PADRON at 305-818-0404

Respectfully,



Allan H. Vargas

FILED
2017 SEP 21 PM 12:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FOURDIAZ VARGAS 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:

RALPH PADRON

Name of Person

PADRON & ASSOCIATES, INC.

Firm/Company

2095 W 76TH STREET - SUITE 102

Address

HIALEAH, FL 33016

City/State and Zip Code

RALPH@RALPHPADRON.COM

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

For further information concerning this matter, please call:

RALPH PADRON

Name of Person

at (305)

Area Code

818-0404

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**

FOURDIAZ VARGAS 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 06/18/2004 and assigned
Florida document number LD4000046036.

This amendment is submitted to amend the following:

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

4DV MARKETING, LLC

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:

PADRON & ASSOCIATES, INC.

New Registered Office Address:

2095 W 76TH STREET - SUITE 102

Enter Florida street address

HIALEAH

, Florida

33016

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	AVACO HOLDINGS LLC	8725 NW 18TH TERRACE	<input type="checkbox"/> Add
		SUITE 204	<input type="checkbox"/> Remove
		MIAMI, FL 33172	<input checked="" type="checkbox"/> Change
AMBR	VARGAS, GUILLAUME	8725 NW 18TH TERRACE	<input checked="" type="checkbox"/> Add
		SUITE 204	<input type="checkbox"/> Remove
		MIAMI, FL 33172	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2017 SEP 21 PM 12:08
FILED
CLERK OF DISTRICT COURT
MIAMI, FL 33131

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

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2011 SEP 21 PM 2:08
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 (3)(b)

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.

(b) The 90th day after the record is filed.

Dated SEPTEMBER 7, 2017

Signature of a member or authorized representative of a member

ALLAN H. VARGAS

Typed or printed name of signee