# L04000070293

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B. BOSTICK APR 17 2014

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### **COVER LETTER**

TO: Registration Section **Division of Corporations** The Lofts at Victoria Park 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: **Charles Rubin** Name of Person **Gutter Chaves** Firm/Company 2101 NW Corporate Blvd., Ste 107 Address Boca Raton, FL 33431 City/State and Zip Code crubin@floridatax.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561) 998-7847
Area Code Daytime Telephone Number Charles Rubin Name of Person Enclosed is a check for the following amount:

**MAILING ADDRESS:** 

□ \$30.00 Filing Fee &

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■ \$25.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

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Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

□ \$55.00 Filing Fee &

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

# THE LOFTS AT VICTORIA PARK 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 9/27/2004 and assigned Florida document number L04000070293 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) 1 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: New Registered Office Address: Enter Florida street address

### 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

, Florida

Zip Code

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member <u>Title</u> **Address** <u>Name</u> **Type of Action ROBERTO JACOB** MGR R. QUINTANA, 753, 120 A., CJ 121 □ Add SAO PAULO, SP 04569 BR Remove \_□ Add \_□ Remove ☐ Remove □ Add ☐ Remove □ Remove \_□ Remove

Article V is amended/added to read as follows: "The
Limited Liability Company shall be managed by
a manager selected by its members."
E. Effective date, if other than the date of filing:  (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)
Dated April 9 2014
Signature of a member or authorized representative of a member
Roberto Jacob, Member
Typed or printed name of signee

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Filing Fee: \$25.00