L05000014532

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



600245090066

02/27/19--01016--003 **25.00

SECRETARY OF STATE OF STORY

C. LEWIS
FEB 2 8 2013
EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp	tion est	was a second of the second of	ا ایجاد اختیاد ا
WA VILLA MA	RIA HELENA HOLDIN	GS LLC	
SUBJECT: VILLY VIV	Name of Limite	ed Liability Company	
The enclosed Articles of A	mendment and fee(s) are subr	nitted for filing.	
Please return all correspon	dence concerning this matter t	to the following:	
	KAREN CAMPBELL		
		Name of Person	
	VILLA MARIA HELEN	IA HOLDINGS, LLC	
		Firm/Company	
	8315 NW 64TH STR	EET, SUITE 1	
		Address	
	MIAMI, FLORIDA 331	166	
		City/State and Zip Code	
	karenscampbell@gma	ail.com be used for future annual report notification	
		•	on)
For further information co	ncerning this matter, please ca	all:	
KAREN CAMPBELI	_	at (786)258-6755	
Name of	Person	Area Code & Daytime Te	lephone Number
Enclosed is a check for the	e 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)

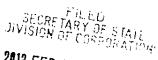
MAILING ADDRESS:

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



VILLA MARIA HELENA HOLDINGS, LLC

2013 FEB 27 AM 10: 46

(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 Li	ability Company	were filed on APRIL 18, 2003	and assigned
Florida document number P03900043947	L050	00014532	
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited liabi	lity company here:	
NO CHANGE			
The new name must be distinguishable and end wit "L.L.C."	h the words "Limit	ed Liability Company," the designation	on "LLC" or the abbreviation
Enter new principal offices address, if applications	able:	NO CHANGE	·
(Principal office address MUST BE A STREE	T ADDRESS)	<u> </u>	
Enter new mailing address, if applicable:		NO CHANGE	
(Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and/or the new registered of			ter the name of the new
Name of New Registered Agent:	NO CHANG	E	
New Registered Office Address:	NO CHANG		
	Enter Florida street address		t address
		, Florid	
		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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Ma MGRM = N	nager Ianaging Member	SECRETARY OF STATE DIVISION OF COMPREATIONS	
<u>Title</u>	Name	Address 2013 FEB 27 AM 10: 46	Type of Action
MGRM	KAREN CAMPBELL	8315 NW 64TH STREET, SUITE 1	Add
		MIAMI, FLORIDA 33166	Remove
MGRM	BRYAN CAMPBELL	8315 NW 64TH STREET, SUITE 1	Add
		MIAMI, FLORIDA 33166	Remove
MGRM	ANGELICA VARELA	8315 NW 64TH STREET, SUITE 1	Add
		MIAMI, FLORIDA 33166	Remove
MGRM	LUIS E. VARELA, JR	8315 NW 64TH STREET, SUITE 1	Add
		MIAMI, FLORIDA 33166	Remove
			Add
			Remove
			Add
			Remove

D. II am	nending any other information, enter change(s) here: (Attach additional sheets. if no	
		SECRETARY OF STATE
		2013 FEB 27 AM 10: 46
Dated FI	EBRUARY 12, 2013	
	Devent Vacely	
	Signature of a member or authorized representative of a member JEANNETTE VARELA	
	Typed or printed name of signee	
	Page 3 of 3	

Filing Fee: \$25.00