

L05000048770

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

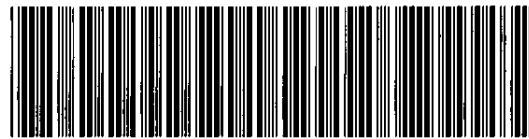
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300207564893

05/18/11--01027--003 **60.00

FILED
11 MAY 18 AM 11:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

MAY 19 2011

EXAMINER

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: LOS ALTOS LB14, 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:

MICHAEL FIGUEROA
Name of Person
SOL-ARCH, INC.
Firm/Company
4917 SW 74th COURT
Address
MIAMI, FL. 33155
City/State and Zip Code
M@SOL-ARCH.COM
E-mail address: (to be used for future annual report notification)

FILED
11 MAY 18 AM 11:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

MICHAEL FIGUEROA at (305) 740-0723
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

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

LOS ALTOS LB14, 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 MAY 17, 2005 and assigned
Florida document number LO500048770.

This amendment is submitted to amend the following:

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

Sol-ARCH Development, LLC

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)

4917 SW 74 COURT
MIAMI, FL 33155

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

MICHAEL FIGUEROA

New Registered Office Address:

4917 SW 74 COURT

Enter Florida street address

MIAMI

City

Florida

33155

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.

mf
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>PRES.</u>	<u>PRIMITIVO COUDE</u>	<u>4917 SW 74 COURT</u> <u>MIAMI, FL. 33155</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VICE PRES.</u>	<u>DULCE COUDE</u>	<u>4917 SW 74 COURT</u> <u>MIAMI, FL. 33155</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VICE PRES.</u>	<u>MICHAEL FIGUEROA</u>	<u>4917 SW 74 COURT</u> <u>MIAMI, FL. 33155</u>	<input checked="" 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.)

Dated MAY 17, 2011

Dulce Coude
Signature of a member or authorized representative of a member

DULCE COUDE
Typed or printed name of signee

FILED
11 MAY 18 AM 11:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA