

205000055323

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

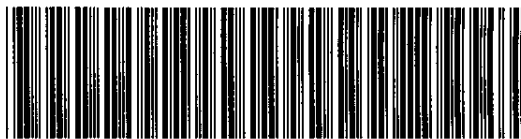
Special Instructions to Filing Officer:

A. LUNT

OCT 23 2012

EXAMINER

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10/22/12--01030--006 **25.00

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2012 OCT 22 PM 3 45
CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ARECA PALMS 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:

ELIAS MITRANI
Name of Person

ARECA MANAGEMENT INC
Firm/Company

2626 NW 2 AVE
Address

MIAMI, FLA. 33127
City/State and Zip Code

PININC@AOL.COM
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

ELIAS MITRANI at (786) 2563812
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**

Arecn Palms 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 JUNE 3, 2005 and assigned Florida document number LOS000055323.

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)

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2012 OCT 22 PM 3:46
CLERK OF CIRCUIT COURT
JANUARY 1, 2013
TALLAHASSEE, FLORIDA

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:

ELIAS MITRANI

New Registered Office Address:

2626 NW 2 AVENUE

Enter Florida street address

MIAMI
City

Florida

33127
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.

Elias Mitrani
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>
MGR	GLOBAL DEVELOPMENT LLC	2645 N. E 207 ST AVENTURA, FL 33180	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	ARECA MANAGEMENT INC	ARECA MANAGEMENT INC 2626 NW 2 AVE MIAMI, FL 33127	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

Stamp: SECRETARY OF STATE, MIAMI, FL 33104, NOV 22 2012

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

NEW REGISTERED AGENT:

ELIAS MITRANI

2626 NW 2 AVE

MIAMI, FL 33127

Tel 786 256 3812

Dated 10-16-12, 2012.

Signature of a member or authorized representative of a member

ELIAS MITRANI
Typed or printed name of signee