

LO5000067322

FLORIDA DEPARTMENT OF STATE  
Division of Corporations  
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(((H14000151698 3)))



H140001516983.ABC2

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SW 4TH LLC

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TALLAHASSEE, FLORIDA  
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JUN 25 2014

S. YOUNG

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

H14000151898

SW 4TH 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 07/05/2005 and assigned  
Florida document number LD5000067322

FILED  
JUN 24 PM 12:00  
STATE OF FLORIDA  
TALLAHASSEE

This amendment is submitted to amend the following:

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

N/A

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:

953 SW 4th Street

(Principal office address MUST BE A STREET ADDRESS)

Miami, Florida

Enter new mailing address, if applicable:

5001 SW 193 LANE

(Mailing address MAY BE A POST OFFICE BOX)

SOUTHWEST RANCHES, FL 33332

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:

IRVIN PENA

New Registered Office Address:

5001 SW 193 LANE

Enter Florida street address.

SOUTHWEST RANCHES

Florida

33332

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

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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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Serafin Sousa	PO Box 141876 Coral Gables, Fl 33114	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Carlos Sousa	PO Box 141876 Coral Gables, Fl 33114	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Irvin Pena	5001 SW 193 Lane Southwest Ranches Florida 33332	<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
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

N/A

E. Effective date, if other than the date of filing: 06/24/2014 (optional)

(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 June 24, 2014

Signature of a member or authorized representative of a member

*IRVIN PERNA*

Typed or printed name of signee

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