Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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ERELLC AMND/RESTATE/CORRECT OR M/MG RESIGN ACOSTA & GUINOT INVESTMENTS LLC

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Page Count	03
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T. Super DESSERVED 2014

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Acosta & Guinot Investme			
(Name of the Lim	ited Liability Company as it naw (A Plorids Limited Liability Con	nppears on our records.)	***
The Articles of Organization for this Limited I Florida document number L05000075223	Liability Company were filed	on 08/01/2005	and assigned
This amendment is submitted to umend the fol	lowing:	d Liability Company," the designation "LLC" or the abbreviation "LLC."	
A. If amending name, enter the new name of	of the limited liability comp	any here:	
The new name must be distinguishable and end with the	s words "Limited Liability Compar	ny," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE.	ET ADDRESS)		
			<u>≥22 - 79</u>
Enter new mailing address, if applicable:			ASSEV TH.
(Matling address MAY BE A POST OFFICE	BOX		<u> </u>
	<u></u> -		
B. If amending the registered agent and registered agent and/or the new registered of		ess on our records, <u>ent</u> e	er the same of the new
Name of New Registered Agent:	Enrique Acosta		*******
New Registered Office Address:	2645 Douglas Rd. S		
		iter Florida street address	
	Miami City	, Florida	33133 Zip Code
New Registered Agent's Signature, if changing	•		up cour

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

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 = Anthorized Member Title Name Address Type of Action **MGRM** Magda L. Guinot 2645 Douglas Rd. _□ Add Suite 703 __ Remove Miami, FL 33133 ___ 🗆 Add __ 🗆 Remove _D Add _____ □ Add ____ 🗖 Remove _□ Add □ Remove _D Add _____ □ Remove

fective date, if other than the date of filing: e effective date must be specific, mannet be prior to date of receipt or filed date and cannot be more than e date this document is filed by the Florida Department of State)	_ (optional) 90 days after
ated,	
Signature of a member or authorized representative of a membe	Г
Enrique Acosta	

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SECRETARY OF STATE
TALL AHASSEE, FLORIDA