

LOS000087568

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

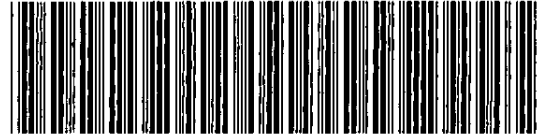
(Business Entity Name)

(Document Number)

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Amendment ✓  
LOS-87568  
NC & Add & delete

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 SEP -9 PM 12:19

FILED

N. CAUSSEAU

SEP 10 2008

EXAMINER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MI RETIRO ALF II, 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:

CHRIS HERNANDEZ  
(Name of Person)

(Firm/Company)

18137 NW 89 PLACE  
(Address)

HIALEAH, FL 33018  
(City/State and Zip Code)

For further information concerning this matter, please call:

RICHARD HERNANDEZ at ( 786 ) 587-4322  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

MI RETIRO ALF II, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
08 SEP -9 PM 12:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on SEPTEMBER 6, 2005 and assigned  
Florida document number L05000087568.

This amendment is submitted to amend the following:

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

MI RETIRO ALF, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**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:

RICHARD HERNANDEZ

New Registered Office Address:

5565 W 13 AVE

(Enter Florida street address)

HIALEAH

(City)

Florida 33012

(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 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>
MGRM	HERNANDEZ FAMILY INVESTING, INC.	18137 NW 89 PLACE HIALEAH, FL 33018	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	RICHARD HERNANDEZ	5565 W 13 AVE HIALEAH, FL 33012	<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

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

ARTICLE II - THE STREET ADDRESS OF THE PRINCIPAL OFFICE AND THE  
MAILING ADDRESS OF THE LLC IS:

CHANGE TO: 5565 W 13 AVE, HIALEAH, FL 33012

Dated August 29, 2008.

  
Signature of a member or authorized representative of a member

CHRIS HERNANDEZ

Typed or printed name of signee

CLERK OF STATE  
HIALEAH, FL 33012

08 SEP - 9 PM 12: 20

FILED