

## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations Fax Number : (850)617-6383

From:

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Account Name : CORP USA Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

FIVED	5 Ph 4:58	من م	LC AMND/RESTATE/CORRECT OR M/MG RESIGN	
<b>FEC</b>	15 001 -1		Curvagua EVERGLADES L.L.C.   Certificate of Status   0   Certified Copy   0   Page Count   05   Estimated Charge   \$25.00	

Electronic Filing Menu

Corporate Filing Menu

**OCT** 0 6 **2015** 

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10/5/2015 30/02/2012 10:31 302633666

		COVER LETTER		
TO: Registration S Division of Co				
CUYAGU	A EVERGLADES, LLC			
	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fue(s) are sut	omitted for filing.		
	ondence concerning this matter	_		
	JAVIER GALARRAGA	Name of Parson		
	CUYAGUA EVERGLAD			
		Firm/Company		
	773 Shotgun Road			
		Address		
	Sunriss, FL 33326			
		City/State and Zip Gode		
	E-mail addresse	a @ SIMIFIEX.COM	ίδμαψη)	
For further information e	concerning this matter, please c	all:		
JAVIER GALARRAGA		st ( <u>954_) 578-6</u>		
Nume (	of Person	Arça Code Daytime	Telephons Number	
Enclosed is a check for t	he following amount:			
	S30.00 Filing Fee & Cortificate of Status	Statistic Control of the state	S60.00 Filing Pee,	
\$25.00 Filing Fee	Collinging of grains	Certified Copy	Certificate of Status & Certified Copy (additional copy is enclosed)	
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CUYAGUA EVERGLADES, LLC		·	
(Name of the Limited Lipility Com (A Florida Limite	n <u>uny as it now appears on t</u> ad Liability Compuny)	ur records.)	
The Articles of Organization for this Limited Liability Comparison	ny were filed on <u>03/17/2</u> 0	006	and assigned
Florida document number L06000028335			
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited h</u>	ability company here:		
The new name must be distinguishable and contain the words "Limited Lie	ubility Company," the designa	tion "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		<b>_</b>	
(Principal office address MUST BE A STREET ADDRESS)			
		, <u> </u>	
Enter new mailing address, if applicable:	<u></u>	· · · · ·	
(Mailing address MAY BE A POST OFFICE BOX)	··		<u> </u>
	·····		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		records, <u>enter</u>	the name of the m
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida st	reet address	
		, Florida	Zip Code
ne versione and the composition of the second se	City		Zip Code
New Registered Agent's Signature, if changing Registered Agen			_
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offu- company has been notified in writing of this change.	te performance of my a provided for in Chapt	hities, and I am ler 605, F.S. Or	familiar with and , if this document is
			2015

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Page 1 of 3

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If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

## MGR = Manager AMBR = Authorized Member

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Title	Name	Address	Type of Action
MGR	GALARRÁGA, JAVIER	P.O. Box 267548, Weston, FL 3331	🗆 Add
		·····	□ Remove
			E Change
MGR	OALARRAGA, GONZALO	P.O. Box 267548, Weston, PL 3332	🖾 Add
		a	Change
MGR	GALARRAGA, MARIA I.	P.O. Box 267548, Weston, FL 333.	D Add
,			□ Remove
			Change
	·····		🖬 Add
			🖾 Remove
			fI Change
	·····		CI Add
			CRETAR
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	Pag	ge 2 of 3	

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

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ffective date, if other than the an effective date is listed, the date mus lote: If the date inserted in this bi	e date of filing: st be specific and cannot be prior to date of filing or more than 90 de look does not meet the applicable statutory filing requirement	_ (optional) ave after filing.) Pursmot to 605.020 nis this data will not be listed as	7 (3)(b) s the
tote: If the dute inserted in this bl incument's effective date on the D e record specifies a delayed The 90th day after the rec	look does not meet the applicable statutory filling requirement repartment of State's records. d effective date, but not an effective time, at 12 april is filed.	nts, this date will not be listed at	s the
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