

LO6000073812

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

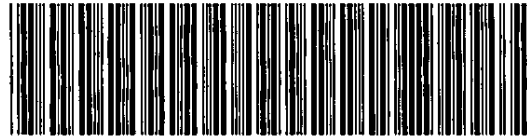
(Business Entity Name)

(Document Number)

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2014 SEP 24 PM 3:15
CLERK OF STATE
TALLAHASSEE FLORIDA

OCT 01 2014
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ACCORDION SHIELDS OF FLORIDA LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

CARLOS MEDINA

Name of Person

ACCORDION SHIELDS OF FLORIDA LLC

Firm/Company

3172 SW 153 PATH

Address

MIAMI FL 33185

City/State and Zip Code

carlosomedina@mc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CARLOS MEDINA

Name of Person

at (305) 431 5533

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 &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ACCORDION SHIELDS OF FLORIDA 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 07/26/2006 and assigned
Florida document number LOG 000073812

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)

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:

New Registered Office Address:

Enter Florida street address

, Florida

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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2007 SEP 24 PM 3:15
CLERK OF CIRCUIT COURT
JANESVILLE, FLORIDA

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	RODOLFO A. FERRO	15908 SW 99 th STREET	<input type="checkbox"/> Add
		MIAMI FL 33196	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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CLERK OF DISTRICT COURT
JANUARY 15, 2015

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

NO, ONLY INFORMATION TO BE AMENDED IS
THE REMOVAL OF MR. RODOLFO A. FERRO
WITH ADDRESS 15908 SW 99th MIAMI FL 33196.
MR. FERRO DECEASED.

E. Effective date, if other than the date of filing: SEPT 25, 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 SEPTEMBER 22ND 2014

CO. UM CM

Signature of a member or authorized representative of a member

CARLOS MEDINA.

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA