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JUN 27 2013

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COVER LETTER



SUBJECT:	1027 4	OWINGS WC		
	Name of Limit	ted Liability Company		
The enclosed Articles of	`Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	RAF	AEU DIAZ Name of Person		
	- 40	Firm/Company		
	310	MIRAME MILE Address		
	CORAL	GABUS, FV 331 Git/State and Zp Code	34	
	E-mail address: (t	AZ Q AVENUE 04 o be used for future armual report notificati	COM ion)	
For further information of	concerning this matter, please c	all:		
RAFAELD!	AZ of Person	at (305 444-9 Area Code & Daylime Te	1545 Sephone Number = 1	
		7 30.00 a 2.1, 7.0	Seption values 2	
Enclosed is a check for t	he following amount:		Direction Constitution of the constitution of	ţ
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

11-10-

10011	10/Una	15,00	.		
(<u>Name of the Limited L</u> (A F	iability Company Iorida Limited Liab	as it nów appears on pility Company)	our records.)		
The Articles of Organization for this Limited Liab	oility Company w	ere filed on	17/200	∠ and assig	;ned
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of the	he limited liabilit	y company here:			
The new name must be distinguishable and end with t "L.L.C." Enter new principal offices address, if applicab	ole:	Liability Company,"	the designation '	'LLC" or the ab	breviatio
(Principal office address MUST BE A STREET)	ADDRESS)			20 2	
Enter new mailing address, if applicable:	-			B BN 2	Fareta mare sha
(Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>			留文 3	177
	-			M 7: 2	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office ce address here:	e address on our	records, <u>enter</u>	the name of	the nev
Name of New Registered Agent:	RA	FAEL DIAZ) 		
New Registered Office Address:		370 MIRAT	ME UIVE Florida street ad	/ /	
	CORAL (GABLES City		aress <u>33 7</u> Zip Code	4_

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.

Charging Registered Agent, Signature of New Registered Agent

Page 1 of 3

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>	Name	Address	Type of Action
MGR	PUARTE VIERA ENTERT	PEBES 370 HIRAUE HILE	Add
		CORAL GABLES, F	Remove
		73/34	
· · · · · · · · · · · · · · · · · · ·			Add
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			Remove

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6.24	, 2013
6.24	malar 10V
6.24	Signature of a member or authorized representative of a member
6.24	Chafail DV

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Filing Fee: \$25.00

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