

L07000015558

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

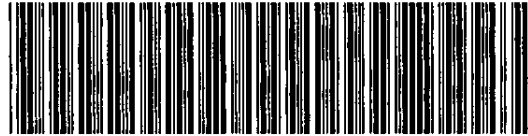
Special Instructions to Filing Officer:

A. LUNT

DEC 13 2012

EXAMINER

Office Use Only



700242398687

CLERK OF STATE
LAHASSIE, FLORIDA

DEC 10 PM 4:15

FILED

12/10/12--01033--016 **25.00

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DISIPADORES DE CALOR MIAMI 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:

GENNALY NIGRO

Name of Person

DISIPADORES DE CALOR MIAMI LLC

Firm/Company

15751 SHERIDAN STREET 206

Address

FORT LAUDERDALE - FL 33331

City/State and Zip Code

SUPLYVAL@HOTMAIL.COM

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

For further information concerning this matter, please call:

GENNALY NIGRO

Name of Person

954 252-7813

at ()

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$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

2012 DEC 10 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

DISIPADORES DE CALOR MIAMI 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 02/09/2007 and assigned
Florida document number L07000015558.

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)

FILED
2012 DEC 10 PM 4:15
CLERK OF STATE
TALLAHASSEE FLORIDA

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:

GENNALY NIGRO

New Registered Office Address:

15751 SHERIDAN STREET 206

Enter Florida street address

FORT LAUDERDALE

City

Florida FL 33331

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.

Gennaly Nigro
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>
MGMR	ANTONIO DIMPERIO	15751 SHERIDAN STREET	<input type="checkbox"/> Add
		206 . FORT LAUDERDALE	<input checked="" type="checkbox"/> Remove
		FL 33331	
MGMR	DAMELIS MARTINE	15751 SHERIDAN STREET	<input type="checkbox"/> Add
		206 . FORT LAUDERDALE	<input checked="" type="checkbox"/> Remove
		FL 33331	
MGMR	GENNALY NIGRO	15751 SHERIDAN STREET	<input checked="" type="checkbox"/> Add
		206 . FORT LAUDERDALE	<input type="checkbox"/> Remove
		FL 33331	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

REC'D
CLERK OF STATE
TALLAHASSEE, FLORIDA
2012 DEC 10 PM 4:16

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

Dated NOVEMBER 29, 2012



Signature of a member or authorized representative of a member

ANTONIO DIMPERIO

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

CLERK OF STATE
TALLAHASSEE, FLORIDA

2012 DEC 10 PM 4:15

FILED