## L07000022498

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JIVISION OF CORPORATIONS

10 JUL 13 AM 10 56

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**EXAMINER** 

## **COVER LETTER**

OT.

TO: Registration 5 Division of Co				
SUBJECT:	SILVA -	PARDO, LLC		
SUBJECT.		ited Liability Company	·	
	f Amendment and fee(s) are sul	•	10 JUL 13 AND SE	
	JES	JESUS R. BELLO ROMERO  Name of Person		
SILVA + PARDO, LLC Firm/Company				
	8009	NW 36th ST., SUITE #20	30	
		DORAL, FL 33166 City/State and Zip Code		
		OJESUS@GMAIL.CON		
For further information	concerning this matter, please	call:	•	
	R. BELLO ROMERO of Person	at ( <u>305</u> ) Area Code & Da	967.7410 ytime 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 enclo	\$60.00 Filing Fee, Certificate of Status & Osed) Certified Copy (additional copy is enclosed)	
Regis Divis P.O.	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, FL 32314	Registration Se Division of Co Clifton Buildin	rporations og e Center Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

10 JIL 13 MAD 56

SILVA + PARDO, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 02/28/2007 The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_ and assigned L07000022498 Florida document number 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." 8009 NW 36th ST., SUITE #230 Enter new principal offices address, if applicable: DORAL, FL 33166 (Principal office address MUST BE A STREET ADDRESS) 8009 NW 36th ST., SUITE #230 Enter new mailing address, if applicable: DORAL, FL 33166 (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 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>	Name	Address	Type of Action				
MGRM	GUSTAVO PARDO S.	10840 NW 84th St. DORAL, FL 33178	✓ Add Remove				
MGRM	ARISTIDES SILVA	10035 NW 44th TER, #305 Doral, FL 33178	Add Remove				
MGRM	YANNY HILLER DE SILVA	10035 NW 44th TER, #305 Doral, FL 33178	Add 				
			Add Remove				
			Add Remove				
			Add Remove				
D. If amendin	g any other information, enter change(s	here: (Attach additional sheets, if necessary.)	_				
Early 10-1		84714	<del></del>				
			_ _				
Dated	Signature of a morpher of	authorized representative of a member	<del></del>				
Signature of a member or authorized representative of a member  JESUSR. BELLO BOMERO							
_	Typed or printed name of signee						
	Page 2 of 2						

Filing Fee: \$25.00