#107000080707

		
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Office Use Only



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SEUNETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY EXAMINER JUL 2 4 2013

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: E San lo ma 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:
Rlie Conzade 2 Name of Person
Firm/Company
Concorde Land Title Services, Inc. 134 South Dixie Highway, #110
Hallandale Beach, FL 33009
City/State and Zip Code Ore date a choo com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (784) 899-2732 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status & Certificate Copy (additional copy is enclosed) Certificate of Status & Certificate 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

13 JUL SECRETA TALLAHAS,	FILED 22 PM 2: 08 RY OF STATE SEE, FLORIDA
cords.)	ONDA

	ESANLOMA LLC	cords.)
(Name of the Limited L (A F	iability Company as it now appears on our re- lorida Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liab Florida document number L07000080707	bility Company were filed on 8/06/2007	and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the des	ignation "LLC" or the abbreviation
Enter new principal offices address, if applical	ole:	
(Principal office address MUST BE A STREET	ADDRESS)	
	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u>ox</u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		s, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida	street address
	, F	Torida
	CHY	ыр фоае

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	ype of Action
MGRM	ANTONIO D'ALESSANDRO	19201 COLLINS AVE, #640	Add
		NORTH MIAMI BEACH, FL 33160	Remove
			Add
			Remove
			. ·
			_ L Add
			Remove
			Add
		·	Remove
			Add
			Remove
	-		
			Add
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
-		
oated July	20 <u>13</u>	
	Signature of a member or authorized representative of a member	
	LORENA V D'ALESSANDRO	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00