407000102344

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nai	me)
(Document Number)		
Certified Copies	Certificate	s of Status
Special Instructions to Filing Officer:		

Office Use Only

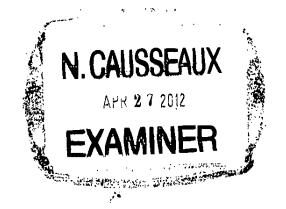


400231689704

L07-102344

04/26/12--01033--021 **175.00

12 APR 26 AHII: 34
SECRETARIASSEE, FLOADA



COVER LETTER

TO:

Registration Section

Division of Corporations		
SUBJECT:	L.L.M., LLC.	
	Name of Limited Liability Company	
The enclosed Article	es of Amendment and fee(s) are submitted for filing.	
Please return all cor-	respondence concerning this matter to the following:	
	RICHARD G. TOLENO, ESQ Name of Person	
	Name of Person	
	Firm/Company	
	21 SE 1st Avenue, 10th Floor Address	
	PAOLA & ISAWICHYUNDAL. COM E-mail address: (to be used for future annual report notification)	
	E-mail address: (to be used for future annual report notification)	
For further informat	ion concerning this matter, please call:	
PAOLA C	ASTILLO RIBON at (305) 416-0202	
Na	ame of Person Area Code & Daytime Telephone Number	
Enclosed is a check	for the following amount:	
√ \$25.00 Filing Fea	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
Re Di P.0	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Clifton Building Blahassee, FL 32314 CSTREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

L.L.M., LLC.	
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability (Florida document numberL07000102344	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	nited liability company here:
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDI	
	P T
	26 T
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	₽ ≟ O
	ω
B. If amending the registered agent and/or regis	stered office address on our records, enter the name of the new
registered agent and/or the new registered office add	<u>lress here</u> :
N. O. D. L.	
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 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 **Type of Action Title Address** <u>Name</u> Francesco Lignanolo Remove PAOLA CASTILLO RIBOW MGR Remove Miami Florida ☐ Add Remove Add Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) April 23 Dated _ Signature of a member or authorized representative of a member RICHARD TOLEDO Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00