

LOF0000 05518

(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:

Office Use Only



800273598788

06/05/15--01013--004 **25.00

FILED
15 JUN -5 AM 11:56
TAMPA, FLORIDA

JUN 08 2015

J SHIVERS



MIAMI LAW GROUP

215 West 49th Street, Hialeah, FL 33012

Dayren L. Suarez, Esq.

Ph. No. (305) 557-4304
Fax No. (305) 821-7846

June 2, 2015

Florida Department of State
Division Of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: 50/50 Management, LLC

To whom it may concern:

Enclosed please find check number 1483 in the amount of \$25.00 for the above referenced LLC and application.

Should you have any questions or need any additional assistance please feel free to contact our office.

Sincerely,

Rebecca Guerrero
Paralegal to Dayren L. Suarez, Esq.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 50/50 Management 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:

Mercedes Gomez Sanchez
Name of Person

50/50 Management LLC
Firm/Company

1995 NE 117th Rd
Address

North Miami, FL 33181
City/State and Zip Code

50.50mgmLLC@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mercedes Gomez Sanchez at (305) 606-2110
Name of Person 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

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

50/50 Management 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 1/28/08 and assigned
Florida document number LD8000009918

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 contain 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)

3410 Palm ave
Hialeah FL 33012

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3410 Palm ave
Hialeah FL 33012

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Mercedes Gomez Sanchez	1995 NE 117 Rd	<input type="checkbox"/> Add
		NM, FL 33181	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Mercedes Gomez Sanchez	3410 Palm Ave	<input checked="" type="checkbox"/> Add
		Hialeah, FL 33012	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Christopher Sanchez	1995 NE 117 Rd	<input type="checkbox"/> Add
		North Miami FL 33181	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Christopher Sanchez	3410 Palm Ave	<input checked="" type="checkbox"/> Add
		Hialeah FL 33012	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Michael C. Sanchez	1995 NE 117 Rd	<input type="checkbox"/> Add
		North Miami FL 33181	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Michael C. Sanchez	3410 Palm Ave	<input checked="" type="checkbox"/> Add
		Hialeah FL 33012	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single page from a notebook or ledger. It features approximately 20 evenly spaced horizontal black lines across its entire width. The lines are thin and consistent in thickness. There is no handwriting, printed text, or any other markings on the page. The background is a uniform off-white color.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 5/26/15

5/26/13

X

AM

Christopher Sanchez

Typed or printed name of signee

15 JAN - 5 AM 11:56