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(Address)

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13 FEB 25 PM 4:53
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

FEB 26 2013

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: VERTICAL TREND ARCHITECTURE 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:

RAFAEL GUISSARRI

Name of Person

Firm/Company

1200 BRICKELL BAY DRIVE APT 2707

Address

MIAMI FL 33131

City/State and Zip Code

rguissarriarchitect@gmail.com

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

For further information concerning this matter, please call:

RAFAEL GUISSARRI

Name of Person

305 498-2577

at ()

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

FILED
13 FEB 25 PM 4:53
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

VERTICAL TREND ARCHITECTURE 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 02/13/2008 and assigned
Florida document number L08000015960.

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)

1200 BRICKELL BAY DRIVE APT 2707

MIAMI FL 33131

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1200 BRICKELL BAY DRIVE APT 2707

MIAMI FL 33131

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:

YANET ALBA

New Registered Office Address:

15002 SW 145th ST

Enter Florida street address

MIAMI

City

Florida 33196

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MARTINEZ, HECTOR J.	15002 SW 145TH ST	<input type="checkbox"/> Add
		MIAMI FL 33196	<input checked="" type="checkbox"/> Remove
MGR/MGRM	ALBA YANET	15002 SW 145TH ST	<input checked="" type="checkbox"/> Add
		MIAMI FL 33196	<input type="checkbox"/> Remove
MGR	RAFAEL GUISSARRI	1200 BRICKELL BAY DRIVE APT 2707	<input checked="" type="checkbox"/> Add
		MIAMI FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated FEBRUARY 20th, 2013.



Signature of a member or authorized representative of a member

Janet Alba

Typed or printed name of signer

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Filing Fee: \$25.00