

LO FC 00078492

(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



800269597448

03/02/15--01019--010 **60.00

FILED
15 MAR - 2 AM 10:56
TREASURY OF STATE
TALLAHASSEE, FLORIDA

MAR 16 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **COLONNADE 904 INVESTMENTS, 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:

Oscar Alejandro Gonzalez Perez

Name of Person

Firm/Company

8395 SW 73 Avenue.# 904

Address

Miami , Florida 33143

City/State and Zip Code

oagp09@gmail.com

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

For further information concerning this matter, please call:

Monica Lopez

Name of Person

at **(305) 401-8522**

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input 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 checked="" 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**

COLONNADE 904 INVESTMENTS, 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 04/16/2008 and assigned
Florida document number L08000038492.

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: 8395 SW 73 Avenue.# 904 . Miami , Florida 33143

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: 8395 SW 73 Avenue.# 904 . Miami , Florida 33143

(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: Monica Lopez

New Registered Office Address: 6135 Metrowest Boulevard. Unit 101

Enter Florida street address

Orlando, Florida 32835

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.

[Signature]
If Changing Registered Agent, Signature of New Registered Agent

[Handwritten signature]

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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	Oscar Alejandro Gonzalez Perez	8395 SW 73 Avenue.# 904 . Miami , Florida 33143	<input checked="" type="checkbox"/> Add
-----	--------------------------------	---	---

			<input type="checkbox"/> Remove
--	--	--	---------------------------------

MGR	CTC MANAGEMENT SERVICES, LLC	220 Alhambra Circle. 11 Floor	<input type="checkbox"/> Add
-----	------------------------------	-------------------------------	------------------------------

		Coral Gables, Florida 33134	<input checked="" 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
--	--	--	---------------------------------

			<input type="checkbox"/> Add
--	--	--	------------------------------

			<input type="checkbox"/> Remove
--	--	--	---------------------------------

Oscar

FILED
15 MAR - 2 AM 10:56
CLERK OF THE COURT
MIAMI COUNTY, FLORIDA

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

[Handwritten signature across the lines]

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated

Feb 11 2015

[Handwritten signature]

Signature of a member or authorized representative of a member

Oscar Alejandro Gonzalez Perez

for Megara Investments, Inc.

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

DEPARTMENT OF STATE
FACSIMILE UNIT
TALLAHASSEE, FLORIDA

15 MAR - 2 AM 10:56

FILED