## L08000044256

(F	Requestor's Name)
(A	Address)
(ř	Address)
(0	City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(E	Business Entity Name)
])	Document Number)
Certified Copies	Certificates of Status
Cassial Instructions	· · · · · · · · · · · · · · · · · · ·

Special Instructions to Filing Officer:

L. SELLERS

JUN 2 5 2008

**EXAMINER** 

Office Use Only



300131502033

06/23/08--01014--003 \*\*25.00

SECRETARY OF STATE ALLAHASSEE, FLORID

108 JUN 23 AM 11:

## **COVER LETTER**

· · · ›

TO: Registration Section
Division of Corporations

Tallahassee, FL 32314

SUBJECT: Lavin &	Company, LLC.		5
		ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Eduardo Lavin		
		(Name of Person)	
	Lavin & Company, LLC.		
		(Firm/Company)	
	8141 W 36th Ave, Unit #	5	
		(Address)	·
	Hialeah Gardens, FL 330	018	
		(City/State and Zip Code)	
For further information c	oncerning this matter, please c	all:	
Eduardo Lavin		at ( 786 ) 355-7583	
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for the	ne following amount:		
<b>☑</b> \$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)
	ING ADDRESS:	STREET/COURIER	ADDRESS:
Divisio	ration Section on of Corporations ox 6327	Registration Section Division of Corporation Clifton Building	ons

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2009 JUN 23 AM 11: 18

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Lavin & Company, 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	y Company were filed on May 2nd, 2008	and assigned
Florida document number L08000044256	·	
This amendment is submitted to amend the following	<b>;</b> :	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the desig	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	2	
B. If amending the registered agent and/or re registered agent and/or the new registered office a		enter the name of the nev
Name of New Registered Agent:	+ Artista - Marina -	
New Registered Office Address:		
	(Enter Florida s	street address)
		orida
	(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 Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Acti	<u>on</u>
MGRM_	Esperanza M. Lavin	8141 W 36th Ave. Unit # 5 Hialeah Gardens, FL 33018	Add Remove	
<del></del>			Add Remove	
			Add Remove	
			Add Remove	
<del></del>			Add Remove	
			Add Remove	
	g any other information, enter chan e change title of Eduardo Lavin from	ge(s) here: (Attach additional sheets, if necessa "MGR" to "MGRM".	<i>ry.)</i> 	
			ZROO JUN	
Dated June 20t	th , 2008	· · · · · · · · · · · · · · · · · · ·	N 23 ANII:	
<del></del>		er or authorized representative of a member	RID A	
	Eduardo Lavin	ed or printed name of signee		

lyped or printed name of sign

Page 2 of 2

Filing Fee: \$25.00