08000068617

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TO:	Registration Sec Division of Corp	tion orations	y .		
CUDIE	Rodeo Movi	ILLC			
SUBJE	CI:	Name of Limi	ted Liability Company		-
The enc	losed Articles of A	mendment and fee(s) are subn	nitted for filing.		
Please r	eturn all correspon	dence concerning this matter t	to the following:		
		Leandro Barbuscio CPA			
			Name of Person		
			Firm/Company		_
		2699 S. Bayshore Drive #3	00		
			Address		_
		Miami FL 33133			
			City/State and Zip Code		
		lbarbuscio@kaufmanrossin.			_
		E-mail address: (t	o be used for future annual r	eport notification)	
For furt	her information co	ncerning this matter, please ca	ill:		
Leandr	o Barbuscio CPA		305 646 Area Code	-6059 Daytime Telephone Num	
	Name of	Person	Area Code	Daytime Telephone Num	ber
Enclose	d is a check for the	e following amount:			
\$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is encl	Certif osed) Certif	Filing Fee, icate of Status & ied Copy onal 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

Rodeo Movil LLC						
(Name of the Limi	(A Florida Limited	i <mark>ny as it now appears on our recoi</mark> Liability Company)	rds.)			
The Articles of Organization for this Limited L Florida document numberL08000068617	Liability Company	were filed on July 16, 2008	and assigned			
This amendment is submitted to amend the fol	lowing:					
A. If amending name, <u>enter the new name c</u>	of the limited liab	oility company here:				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LL	C" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:		2699 S. Bayshore Drive Ste 300				
(Principal office address MUST BE A STREET ADDRESS)		Miami FL 33133				
Enter new mailing address, if applicable:		2699 S. Bayshore Drive Ste	300			
(Mailing address MAY BE A POST OFFICE	BOX)	Miami FL 33133				
(Mutang dadress MAT BEAT 051 OF FICE BOA)			70.70			
B. If amending the registered agent and registered agent and/or the new registered of			SSET OF THE			
Name of New Registered Agent:			100 S			
New Registered Office Address:	2699 S. Baysh	99 S. Bayshore Drive Ste 300				
		Enter Florida street addr				
	Miami		Florida 33133			
		Citv	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

Page 1 of 3

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>	Address	Type of Action
MGRM	Diego J. Vespa	5161 Collins Ave Apt 505	Add
		Miami Beach FL 33140	■ Remove
			Change
MGR S	Sysconst Corp.	2699 S. Bayshore Drive Ste 300	■ Add
		Miami FL 33133	☐ Remove
			□ Change
			Add
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effective date is listed, the date: If the date inserted in t	ite must be specific a	nd cannot be p	rior to date of fil	ng or more than S	0 days after filing	g.) Pursuan	it to 605.02
cument's effective date on	the Department of	State's reco	rds.	ry ming require	ments, this date	; will not	be listed a
record specifies a de he 90th day after the	layed effective e record is filed	date, but	not an effec	ctive time, at	: 12:01 a.m.	on the	earlier
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