L08000073953

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L08-73953 Amend



OCT -1 2015 N. CAUSSEAUX

COVER LETTER

Division of Cor	rporations	
PUERTO E SUBJECT:	DEL MAR, LLC	
SOBJECT.	Name of Limited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are submitted for filing.	
	condence concerning this matter to the following:	
	Jorge E. Otero, Esq.	
	Name of Person	
	Jorge E. Otero & Associates, P.A.	
	Firm/Company	
	75 Valencia Avenue, Fourth Floor	
	Address	
	Coral Gables, Florida 33134	
	City/State and Zip Code	
	service@oterolaw.com E-mail address: (to be used for future annual report notification)	
5 6 1 1 6 1		
For further information co	concerning this matter, please call:	
Jorge E. Otero, Esq.	305 567-9000 at ()	
Name o	of Person Area Code Daytime Telephone Number	
Enclosed is a check for the	the following amount:	
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy	દ
÷	(additional copy is enclosed	d)

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

PUERTO DEL MAR, LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on August 1, 2008	and assigned
Florida document number L08000073953	'	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR.	ESS)	
		5 8
Enter new mailing address, if applicable:		- SSE - 9
(Mailing address MAY BE A POST OFFICE BOX)		
		1.00 G
B. If amending the registered agent and/or regist		REAL OF THE REAL O
B. If amending the registered agent and/or registered agent and/or the new registered office addr	ered office address on our records, <u>enter</u> <u>ess here:</u>	the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
Treggiotor Office Addiess.	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>	Type of Action
MGR	Veronica M. Garcia	16155 SW 117 Avenue, Unit B-2	
		Miami, FL 33177	□ Remove
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fan effective Note: If the	ate, if other than date is listed, the date date inserted in the effective date on the	e must be specific : iis block does no	and cannot be meet the	applicable	statutory filia	nore than 90 da ng requiremer	its, this date v	Pursuant to 605, will not be liste	.0207 (3 ed as the
	specifies a dela n day after the	yed effective record is file	- e date, b d.	ut not an	effective	time, at 12	::01 a.m. c	on the earlie	er of:
ne record : The 90th		_	۸.	10					
The 90th	SEPT.	-28	<u> </u>	115.					
ne record : The 90th Dated	SEPT.	.28	5	<u> </u>	. د د م	·			

Page 3 of 3

Filing Fee: \$25.00