L08000 110964

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

D. BRUCE

AUG 3 1 2010

EXAMINER



August 31, 2010

LUCIANO TORRES 24900 SW 149 AVENUE HOMESTEAD, FL 33032

SUBJECT: 225 NW LLC Ref. Number: L08000110964

We have received your document for 225 NW LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 910A00020791

O SEP 10 PM 3: 16
CCRETARY OF STATE
LLAHASSEE, FLORIDA

COVER LETTER

TO: Registrati Division o	on Section f Corporations	• .
SUBJECT:	225 NW LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Articl	es of Amendment and fee(s) are submitted for filing.	
Please return all cor	rrespondence concerning this matter to the following:	
	LUCIANO TORRES	
	Name of Person	
	Firm/Company	,
	24900 SW 149 AVENUE Address	
	HOMESTEAD, FL. 33032	10 SI 5208 FALLA
•	City/State and Zip Code	FIL 10 SEP 10 SECRETARY
For further information	loutorres08@bellsouth.net E-mail address: (to be used for future annual report notification) tion concerning this matter, please call:	
	at ()	3: 16 STATE LORIDA
N	ame of Person Area Code & Daytime Telephone Number	
Enclosed is a check	for the following amount:	
▼ \$25.00 Filing Fe	Certificate of Status Certified Copy Certificat (additional copy is enclosed) Certified	te of Status &
R D P.	AAILING ADDRESS: egistration Section livision of Corporations O. Box 6327 allahassee, 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

225 NW 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 Lia Florida document number L080001109	filed on	12/03/2008	and assigned				
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 "L.L.C."	the words "Limited Lia	bility Company	" the designation "L	LC" or the abbreviation			
Enter new principal offices address, if applicable:				ŽĄL			
(Principal office address MUST BE A STREET ADDRESS)							
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				IO PH 3: IG TARY OF STATE ASSEE, FLORIDA			
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:	RONIEL RODRIG	GUEZ IV, PA					
New Registered Office Address:	20533 BISCAYNE BLVD 1243						
	Enter Florida street address						
	AVEN	······································	, Florida	33180			
New Registered Agent's Signature, if changing Re	City egistered Agent:			Zip Code			
I hereby accept the appointment as registered the provisions of all statutes relative to the pro- accept the obligations of my position as regist being filed to merely reflect a change in the re- company has been notified in writing of this company.	l agent and agree to o oper and complete po tered agent as provia egistered office addre	erformance of led for in <u>Cha</u> t	my ductes, and I/a pter 608, F.S. For,	m familiar with and if this document is			

Page 1 of 2

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>	Address	Type of Action
MGR	LUCIANO TORRES	24900 SW 149 AVENUE HOMESTEAD, FL 33032	Add Remove
MGRM	EFREIN L. TORRES	2121 NW 24 AVENUE MIAMI, FL. 33142	Add Remove
			Add Remove
· -			Add Remove
•	 		Add Remove
<u>.</u>			Add Remove
D. If amendi	ing any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	
	0/10 90	73 . / _	10 SE T
Dated	Signature of a members	Strauthorized representative of a member	TALLARIASSEE FLORIDA
	RONIEL	RODRIGUEZ IV, PA	3: 16 STATE FLORIDI
		Page 2 of 2	<i>y</i>
	/ Fil	ling Fee: \$25.00	