

L09000005643

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

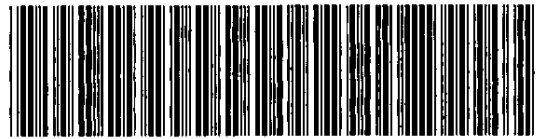
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10 MAY -4 PM 4:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. G. G. MAY - 5 2010

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Marbella & Company, 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:

Felix Martin
Name of Person

Marbella & Company, LLC
Firm/Company

1616 W 68 Street
Address

Hialeah, Florida 33014
City/State and Zip Code

felixmartin11@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Felix Martin at (305) 827-1001
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$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)

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**

Marbella & Company, LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company were filed on 01/20/2009 and assigned Florida document number L09000005643.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

(Principal office address MUST BE A STREET ADDRESS)

1616 W 68 Street

Hialeah, Florida 33014

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1616 W 68 Street

Hialeah, Florida 33014

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:

Felix Martin

New Registered Office Address:

1616 W 68 Street

Enter Florida street address

Hialeah

City

, Florida

33014

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, 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Suazo, Cristina C	11888 NW 2nd Street Coral Spring, Florida 33071	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Martin, Felix	1616 W 68 Street Hialeah, Florida 33014	<input checked="" 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

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 TALLAHASSEE, FLORIDA

Dated April 29, 2010

Cristina Suazo

Signature of a member or authorized representative of a member

CRISTINA SUAZO

Typed or printed name of signee