## LOGOOOOL

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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Miami's New Investments 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:
Yenisley A Losta (Name of Person)
Mani's new Investments LLC (Firm/Company)
16080 SW 155 AV (Address)
Miami FL 33187 (City/State and Zip Code)
For further information concerning this matter, please call:
Venisley Acosta at (786) 256 5240  (Name of Person)  (Area Code & Davtime Telephone Number)
(Mane of Ferson) (Mea code & Dayline Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  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**

Mamils	New I	nuestr	nen's L	LC	
(Name of the Limited (A	Liability Company as Florida Limited Liabilii	it now appears on y Company)	our records.)		
The Articles of Organization for this Limited Liz Florida document number <u>L 090000</u>		filed on	126/200	and assi	igned
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liability c	ompany here:			
The new name must be distinguishable and end with "L.L.C."	the words "Limited Li	ability Company,"	the designation "LI	.C" or the a	bbreviation
Enter new principal offices address, if applica	ble:				
(Principal office address MUST BE A STREET	ADDRESS)			<u> </u>	
				<u> </u>	·
				<b>3</b>	+ 1
Enter new mailing address, if applicable:			•	图3 上	TE MAN
(Mailing address MAY BE A POST OFFICE B					277
* '	~ <del>-</del>		r C	⇒ <u></u> œ	J
			S	E	<del></del>
B. If amending the registered agent and/or registered agent and/or the new registered off.	r registered office a <u>ice address here</u> :	ddress on our	records, <u>enter th</u>	e name of	f the new
Name of New Registered Agent:	Yenisle	Y ALOS	ta		<del></del>
New Registered Office Address:	16080S	W 155	Florida street addr	ross)	
	NID		, Florida <u>3</u>	210	7
	1-1 Cir	(v)	, Florida <u></u>	Zip Code	<u>r                                    </u>
New Registered Agent's Signature, if changing Re	egistered Agent:	//		,2-,2 0040	9

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, thereby confirm that the limited liability company has been notified in writing of this change.

> (If Changing Regist ed 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 Yenisley Acosta Remove 🗂 Add Remove Remove ☐ Add Remove \_\_\_ Add Remove Add 🗂 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a iember or authorized representative of a member Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00