L8900050960

(Requestor's N	ame)
-	• •
(Address)	· · · · · · · · · · · · · · · · · · ·
	Á
· · · · · · · · · · · · · · · · · · ·	•
(Address)	
(Address)	
i i i	
(City/State/Zip/	Phone #)
	•
PICK-UP WA	T MAIL
L PICK-OF L WA	, MINIT
(Business Entit	y Name)
•	
(Document Nur	mher)
(Doodinon Hu	inder)
and the same of th	
Certified Copies Certif	icates of Status
₹,	
<u> </u>	
Special Instructions to Filing Office	F -
Special instructions to 1 mily Office	
-	
•	

Office Use Only



400182051914

06/17/10--01025--015 **25.00

T. CLINE

JUN 18 2010

EXAMINER

DERETARY OF STATE

CAMPACIA CANPACIA CAMPACIA CAMPACIA CAMPACIA CAMPACIA CAMPACIA CAMPACIA CAM

COVER LETTER

10.	Division of Corporations						
SUBJEC	CT: ARTWIN MANA	GEMENT, LL	Ö				
20000	Name of Limited L						
	•		,				
The encl	osed Articles of Amendment and fee(s) are submitte	ed for filing.					
Please re	eturn all correspondence concerning this matter to the	e following:					
	AL	EX RENALDO	. ;				
		Name of Person					
	ARTWIN!	MÂNAGEMENT,	LLC.		•	. .	-
		Firm/Company					•
•	200 17	· 2ND STREET #:	510				
		Address					
		LES BEACH, FL	33160	·			
		•	COM				
	E-mail address: (to be to	AS59@YAHOO used for future annual re	port notification)	i			
For furth	ner information concerning this matter, please call:		•				
	ALEX RENALDO	at (_305_)	775-0		SEC	3	
	Name of Person	Area Code &	& Daytime Teleph	one Number	RETA		
			. 4	•	SSE	7	
Enclosed	d is a check for the following amount:	.•		:	mer.		TT
\$25.0	00 Filing Fee \$30.00 Filing Fee & Certificate of Status]\$55:00 Filing Fee & Certified Copy (additional copy is		\$60.00 Filing Certificate of Certified Co (additional)	Feet? of Status & opyzita	学 2	C'

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

ARTWIN MAI	<u>NAGEMENT, LI</u>	_C.			
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appeated Liability Company)	irs on our records.)			
The Articles of Organization for this Limited Liability Comp	pany were filed on	06/14/2010	and assigned		
Florida document numberL0900050960		•			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited	liability company he	re:			
		•	•		
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Comp	oany," the designation	"LLC" or the abbreviatio		
Enter new principal offices address, if applicable:	200 172ND	STREET #510			
(Principal office address MUST BE A STREET ADDRES.	S) SUNNY ISL	ES BEACH, FL 3			
			ECRET U		
Enter new mailing address, if applicable:	200_172ND	STREET #510	HASS		
(Mailing address MAY BE A POST OFFICE BOX)	SUNNY ISL	ES BEACH, FL 3	33160😑 📴		
		٠	S S		
B. If amending the registered agent and/or registere	d office address on	our records, enter	The name of the new		
registered agent and/or the new registered office address		,			
		e e e e e e e e e e e e e e e e e e e			
Name of New Registered Agent:		***			
New Registered Office Address:	The state of the s				
	Ε	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 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

<u>Title</u>		Name		Address		- ;	Type of Action
			•			!	Add
-			:				Remove
						 	<u>- </u>
	<u>.</u>				·····	•	Add Remove
							— Kemove
					•	:	Add
	·		 				Remove
	•			*•	•	•	
	<u>.</u>		 .	· · · · · · · · · · · · · · · · · · ·	······	:	Add
							Remove
						ï	7.C_ 22
							Z Add Remove →
		٠,					
	_						n_ Add PTP
							Newsove
D. If ar	nending	g any other information, ent	ter change(s)	here: (Attach a	additional sheet	s, if necessary.)	20 × 20
		, , , , , , , , , , , , , , , , , , ,		, ,			.,
					<u> </u>		
. <u>-</u> .						- President	

					-		
Dated _		· · · · · · · · · · · · · · · · · · ·	,	^			
	٠.	-		He all	// · · . · . · . · . · . · . · . ·	;	
		Signature of		authorized repres	entative of a mer	nber	
			· Alex	//. Keua printed name of s			

Page 2 of 2

Filing Fee: \$25.00