## L09000056781

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12 NOV 30 PH 1: 33

DEC 3 2012

T. HAMPTON

## **COVER LETTER**

TO: Registration Section
Division of Corporations

rcr. Isabianca 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:

Ivette H. Leon, Esq.

Name of Persor

Ivette H. Leon, P.A.

Firm/Company

2460 S.W. 137th Avenue, Suite 238

Address

Miami, Florida 33175

City/State and Zip Code

ivettehleon@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ivette H. Leon, Esq.

786 348-2180

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)

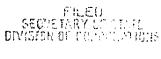
☐\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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



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Isabianca Investments, LL		
(Name of the Limited Lia (A Flo	bility Company as it now appears on our r orida Limited Liability Company)	ecords.)
	i	
The Articles of Organization for this Limited Liabil	lity Company were filed on June 11, 2	2009 and assigned
Florida document number L09000056781	··	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Company," the de	signation "LLC" or the abbreviation
Enter new principal offices address, if applicable	e:	-
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:	•	
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>	
B. If amending the registered agent and/or in registered agent and/or the new registered office		ds, enter the name of the new
Name of China David and American		
Name of New Registered Agent:		188 t 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
New Registered Office Address:	E	
	Enter Florida	a 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u> MGR	Name Augusto Gil	Address 7300 SW 93 Ave	Type of Action  Add
		Suite 210	Add Remove
		Miami, Florida 33173	Remove
			Add
	•		Remove
			Add
			Remove
		~	_
			Add Add
			Remove
<del></del>			_ Garage
		•	Remove
			_
			Add
			Remove

. If amending any other information, ento	er change(s) here: (Attach additional sheets, if necessary.)
November 29	2012
Jem	w Con
Signature of	a member or authorized representative of a member
Pedro Adrian, as Trustee of the Ad	ria Maria Adrian Almeida Grantor Trust dated February 5, 1999
	Typed or printed name of signee

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Filing Fee: \$25.00