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10 APR 14 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

APR 15 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MEDITERRANEAN PROPERTY INVESTMENT, 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:

JUAN M. ESPINOSA

Name of Person

J&B ACCOUNTING AND OTHERS, INC

Firm/Company

3611 SW 87th Ave Ste.105

Address

Miami, Florida 33165

City/State and Zip Code

JOHNESPINOSA@HOTMAIL.COM

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

For further information concerning this matter, please call:

EDUARDO OROZCO

Name of Person

at (786)

226-3450

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**

MEDITERRANEAN PROPERTY INVESTMENT, 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 Liability Company were filed on 06/16/2009 and assigned
Florida document number L09000058571

FILED
10 APR 14 AM 11:15
CLERK OF CIRCUIT COURT
CLAY COUNTY, FLORIDA

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 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)

3611 SW 87TH AVE STE.105

MIAMI, FLORIDA 33165

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3611 SW 87TH AVE STE.105

MIAMI, FLORIDA 33165

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:

New Registered Office Address:

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
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	GIOVANNI GIARDI	VIA VIVALDI 18 CARPI-MODENA ITALIA MO 41012 IT	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	BIBIANA ALVAREZ	9043 SW 6TH ST MIAMI, FLORIDA 33174	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	STRATOS & ASSOCIATES	3141 SW 140 AVE MIAMI, FLORIDA 33175	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	EDUARDO OROZCO	9794 SW 138 AVE MIAMI, FLORIDA 33186	<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

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

Dated APRIL 10TH 2010

Signature of a member or authorized representative of a member

BIBIANA ALVAREZ

Typed or printed name of signee