

LDA000046377

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500253227235

10/31/13--01023--006 \*\*25.00

CLERK OF COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE COUNTY OF DADE, FLORIDA

2013 OCT 31 PM 1:44

FILED

NOV 01 2013

CLERK

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **NEYMARA 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:

**RICARDO SALAS**

Name of Person

Firm/Company

**9835 SW 72nd STE SUITE 206**

Address

**MIAMI, FL 33173**

City/State and Zip Code

**rsalas99@gmail.com**

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

For further information concerning this matter, please call:

**RICARDO SALAS**

Name of Person

at ( **786** ) **539-7869**

Area Code & Daytime Telephone Number

FILED  
2013 OCT 31 PM 1:44  
CLERK OF STATE  
TALLAHASSEE FLORIDA

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**

**NEYMARA INVESTMENTS, 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 07/09/2009 and assigned  
Florida document number L09000066377.

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:**

N/A

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

N/A

**(Mailing address MAY BE A POST OFFICE BOX)**

**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:

N/A

New Registered Office Address:

N/A

*Enter Florida street address*

City

, Florida

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:

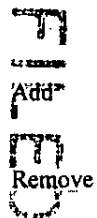
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	THE RAMOS FAMILY	14319 SW 103 TERRACE	<input type="checkbox"/> Add
		MIAMI, FL 33186	<input checked="" type="checkbox"/> Remove
MGRM	JUAN M RAMOS	14319 SW 103 TERRACE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33186	<input type="checkbox"/> Remove
MGRM	BLANCA E FRIAS DE RAMOS	14319 SW 103 TERRACE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33186	<input type="checkbox"/> Remove
MGRM	MARY C RAMOS	14319 SW 103 TERRACE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33186	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

2013 OCT 31 PM 1:44

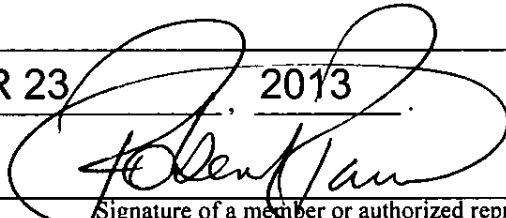


D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

N/A

Dated

OCTOBER 23, 2013



Signature of a member or authorized representative of a member

ROBERTO J RAMOS

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED

2013 OCT 31 PM 1:44

SECRETARY OF STATE  
TALLAHASSEE FLORIDA