## L09000078056

(Dayyastada Navas)				
(Requestor's Name)				
(Address)				
(Address)	•			
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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## **COVER LETTER**

Division of Corporations				
SUBJECT:	2-915 BLUE LAGOON PROPERTY, LLC			
	Name of Limited Liability Company			
The enclosed Articles	of Amendment and fee(s) are submitted for filing.			
Please return all corres	pondence concerning this matter to the following:			
•	Elvira Pimienta			
	Name of Person			
	2-915 BLUE LAGOON PROPERTY, LLC			
	Firm/Company			
	2121 PONCE DE LEON BLVD STE 1050			
	Address			
	CORAL GABLES FL 33134			
	City/State and Zip Code			
	elvira@avilausallc.com  E-mail address: (to be used for future annual report notification)			
	E-mail address: (to be used for future annual report notification)			
For further information	n concerning this matter, please call:			
	Ivira Pimienta at ( 7.86 ) 343-8949			
Name	e of Person Area Code & Daytime Telephone Number			
. •				
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee; Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)			

TO:

**Registration Section** 

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

2-915 BLUE LAGOON PROPERTY, LLC TALLAMSSEE, FLORIDA

FILED

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SEGRETARY OF STATE

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) Florida The Articles of Organization for this Limited Liability Company were filed on and assigned L09000078056 Florida document number 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) Enter new mailing address, if applicable: (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: New Registered Office Address: Enter Florida street address City

New Registered Agent's Signature, if changing Registered Agent:

V.

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

تتراكا

<u>Title</u>	Name Name	Address	Type of Action
MGR	Elvira Pimienta	6713 NW 107TH PLACE Doral Florida 33178	Add Remove
			Add Remove
		· · · · · · · · · · · · · · · · · · ·	Add Remove
			Add Remove
			Add Remove
<del></del>			Add Remove
	ending any other information, enter controls.  Changing Member's tittle from:	change(s) here: (Attach additional sheets, if necessary.)  MGRM to MGR	
-			<del></del>
Dated	September 12	2012	
	Signature of a m	nember or authorized representative of a member	
		Elvira Pimienta  Typed or printed name of signee	

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Filing Fee: \$25.00