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**EXAMINER** 



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11/23/09--01023--006 \*\*25.00

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SECRETARY OF STATE
DIVISION OF CORPORATION

COVER LETTER
TO: Registration Section Division of Corporations
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
Josefa Hernande & Name of Person  Rumbo Investments LLC Firm/Company  2950 5.W. 3 - Ave 7-13  Address  Miami, Fl 33129  City/Scate and Zip Code
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:
Josefa Hernandez at (305 858 - 1563  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:

\$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

\$30.00 Filing Fee &

Certificate of Status

\$25.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

S60.00 Filing Fee,

Certified Copy

Certificate of Status &

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

( <u>Name of the Limited Liability Compan</u> (A Florida Limited Li	( as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company of Florida document number $19-88395$ .	were filed on Sept. 11, 2009 and assigned	
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and end with the words "Limite	d Liability Company," the designation "LLC" or the abbreviati	on —
"L.L.C."	09	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		三路
Enter new mailing address, if applicable:		25 S
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	45
B. If amending the registered agent and/or registered office address here.		<u>z</u> <u>ew</u>
Name of New Registered Agent:		-
New Registered Office Address:		-
	Enter Florida street address	
	City Zip Code	
New Registered Agent's Signature, if changing Registered Agent;	City Zip Code	
I hereby accept the appointment as registered agent and agre- the provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	tte performance of my duties, and I am familiar with an rovided for in Chapter 608, F.S. Or, if this document is	d

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

MGRM = Managing Member

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:

<u>Title</u> Name Address Type of Action ☐ Add Remove Remove ☐ Add Remove ∏Add Remove ∏Add Remove □Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) GRM Alexis E. Montiel address 15 Dated December nature of a member or authorized representative of a member -/ernande-Z Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00