

7/10/2015

LOS000 107967

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : BUSINESS SUPPORT USA
Account Number : I20120000073
Phone : (305)364-8824
Fax Number : (305)456-2910

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
DADE I INVESTMENT LLC

Certificate of Status	0
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Page Count	01
Estimated Charge	\$25.00

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TALLAHASSEE, FLORIDA

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Corporate Filing Menu

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DADE 1 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:

GUZMAN & GUZMAN PA

Name of Person

GUZMAN & GUZMAN PA

Firm/Company

9130 S DADELAND BLVD STE 1509

Address

MIAMI, FL 33156

City/State and Zip Code

LENSUR-ACCOUNTING@LIVE.COM

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

For further information concerning this matter, please call:

GUZMAN & GUZMAN

at (305) 6701991

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

DADE I 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 10/28/2009 and assigned Florida document number L09000103967

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

9130 S DADELAND BLVD

(Principal office address MUST BE A STREET ADDRESS)

STE 1509

MIAMI, FL 33156

Enter new mailing address, if applicable:

9130 S DADELAND BLVD

(Mailing address MAY BE A POST OFFICE BOX)

STE 1509

MIAMI, FL 33156

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 605, 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

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	RICARDO ODELLA	6187 NW 167 ST STE H20	<input type="checkbox"/> Add
		MIAMI, FL 33015	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DANIEL CASSOLA	9130 S DADELAND BLVD	<input checked="" type="checkbox"/> Add
		STE 1509	<input type="checkbox"/> Remove
		MIAMI, FL 33156	<input type="checkbox"/> Change
MGR	GUSTAVO GEA	9130 S DADELAND BLVD	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33156	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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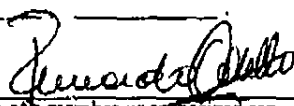
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: 07/10/2015 (optional)
 (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
 (b) The 90th day after the record is filed.

Dated JULY 10 2015


 Signature of a member or authorized representative of a member

1
 Typed or printed name of signee