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## **COVER LETTER**

	gistration Sevision of Cor			
SUBJECT:		d Co., LLC		
		Name of Limit	ted Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are subm	nitted for filing.	
Please return	all correspo	ondence concerning this matter t	o the following:	
		Roberto J. Ortiz		
			Name of Person	
		Law Offices of Roberto J. C	Ortiz, P.A.	
			Firm/Company	
		8750 NW 36th Street, Suit of	2 425	
			Address	
		Doral, Florida 33178		
			City/State and Zip Code	
		roberto@wpolaw.com  E-mail address: (to	be used for future annual report notifi	ication)
For further in	nformation c	oncerning this matter, please ca	-	
Roberto J. O	Ortiz		305 400-2210	
	Name o	f Person	at ()	Telephone Number
Enclosed is a	a check for th	ne following amount:		
■ \$25.00 F	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

Runners and Co., LLC		
(Name of the Lim	ited Liability Company as it now appears on (A Florida Limited Liability Company)	our records.)
e Articles of Organization for this Limited	Liability Company were filed on 11/18/2	2009 and assigned
rida document number L09000111064	· · · · · · · · · · · · · · · · · · ·	
s amendment is submitted to amend the fol	llowing:	
If amending name, enter the new name	of the limited liability company here:	
new name must be distinguishable and contain the	words "Limited Liability Company," the design	nation "LLC" or the abbreviation "L.L.C."
ter new principal offices address, if appli	icable:	
incipal office address MUST BE A STRE	ET ADDRESS)	
ter new mailing address, if applicable:		
ailing address MAY BE A POST OFFICE	<u> </u>	
IC a modern discount of the contract of the co	4/	
If amending the registered agent and istered agent and/or the new registered of	_	r records, enter the name of the
		AILS SURVEY
Name of New Registered Agent:	Roberto J. Ortiz, Esq.	ASSISTANCE OF THE PROPERTY OF
New Registered Office Address:	8750 NW 36th Street, Suite 425	£ 2 € 2 € 2 € 2 € 2 € 2 € 2 € 2 € 2 € 2
	Enter Florida s	<u></u>
	Doral	, Florida 📆 🙃 🕏
	City	Zin 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

Page 1 of 3

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>	Address	Type of Action
MGRM Britto, Lidio A		10770 NW 66 Street, Suite 104	□ Add
		Doral FI 33178	Remove
			Change
MGRM	Britto, Maristela R	10770 NW 66 Street, Suite 104	
		Doral, FL 33178	■ Remove
			□ Change
MGRM	Uzzo, Giuseppina	2480 Bay Isle Drive	■ Add
		Weston, FL 33327	☐ Remove
			☐ Change
MGRM	Del Corro, Jose Andres	2480 Bay Isle Drive	■ Add
		Weston, FL 33327	□ Remove
			Change
MGR	Tardugno Silvio	2480 Bay Isle Drive	Add
		Weston, FL 33327	Remove
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effective date is listed, the date must be specific and cannot be p te: If the date inserted in this block does not meet the app	plicable stat	tuing or more the utory filing requ	in 90 days after firements, this	date will	rsuant to I not be	listed
ument's effective date on the Department of State's reco	rds.					
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Filing Fee: \$25.00

Typed or printed name of signee