

LO9000121989

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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T. CLINE

NOV 27 2012

EXAMINER

SECRETARY OF STATE
TALLAHASSEE, FL 32304
NOV 26 PM 12:43

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 7935 NBV 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:

ANA MARIA CAMACHO ESQ.
Name of Person

CONTRERAS JONASZ CAMACHO PA
Firm/Company

141 ALMERIA AVE.
Address

CORAL GABLES, FL. 33134
City/State and Zip Code

amc@cjclaw.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANA MARIA CAMACHO at TEL 594.0180 x307.
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

2012 NOV 26 PM 12:43
SECRETARY OF STATE
TALLAHASSEE, FL 32301
FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

7935 NBV 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 12/24/09 and assigned
Florida document number LO9000121989.

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: N/A

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

, Florida

City

RECEIVED
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TALLAHASSEE, FLORIDA
2010 JAN 25 PM 1:43

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.

N/A

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>FRANK GUERRA</u>	<u>7491 W. OAKLAND PARK Blvd.</u> <u>Suite 306</u> <u>LAUDERHILL, FL. 33319</u>	☒ Add ☐ Remove

MGR Josee DeRepentigny 7491 W. OAKLAND PARK BLVD. ☒ Add
Suite 306
LAUDERHILL, FL. 33319 ☐ Remove

☐ Add

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SECRETARY OF STATE
TALLAMSCOTT GARDEN

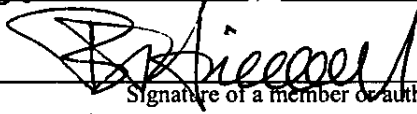
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

Dated November 13, 2012



Signature of a member or authorized representative of a member

Bernard Thibault

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TALLAHASSEE, FL 32310