Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Τφ:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : 120080000067 Phone : (845)425-0077

Fax Number : (845)818-3588

**Enter the small 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 W SANCHEZ GROUP LLC

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JAN 19 2010

EXAMINER

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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

W Sanchez (Group LLC	on our records)			
(Name of the Limited Liability Compar (A Florida Limited L	lability Company)	ra via ogni recordati			
The Articles of Organization for this Limited Liability Company	were filed on	01/05/2010	ZOME as Maned		
Florida document number L10000001367					
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liabi	ility company he	<u>re</u> :	TARY OF STA		
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Compo	any," the designation "I			
Enter new principal offices address, if applicable:	20533 Biscayne Blvd				
(Principal office address MUST BE A STREET ADDRESS)	Aventura, FL 33180				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	20533 Biscay Aventura, FL	33180			
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		our records, <u>enter (</u>	he name of the ne		
Name of New Registered Agent:					
New Registered Office Address:					
	Er	uer Florida street ada	ress		
		, Florida			
New Remistered Agent's Signature If changing Registered Agents	City		Zip Code		

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 duttes, 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:

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D Ifamendir	og any other information, enter chang	e(s) here: (Attach additional sheets, if necessar,	——— у.)
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	January 14 20	010	
Dated	Variously 14	of the state of th	
_	Signature of a membe	r or authorized representative of a member	
	First "" (1887)	rry, Authorized Representative	

Filing Fee: \$25.00

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