

L10 0000 3090

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD

AUG - 6 2010

EXAMINER



900183427679

08/05/10--01016--003 **25.00

FILED
10 AUG - 5 PM 2:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LA SERENA HOLDINGS 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:

ENRIQUE TERAN

Name of Person

Firm/Company

8700 W FLAGLER ST SUITE 160

Address

MIAMI FL 33174

City/State and Zip Code

EJTERAN@GMAIL.COM

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

For further information concerning this matter, please call:

ENRIQUE TERAN

Name of Person

at (**305**) **229-1146**

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**

LA SERENA HOLDINGS 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 01/11/2010 and assigned Florida document number L10000003090.

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8700 W FLAGLER ST SUITE 160

MIAMI FL 33174

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8700 W FLAGLER ST SUITE 160

MIAMI FL 33174

FILED
10 AUG -5 PM 2:02
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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:

Cecilia Teran

New Registered Office Address:

8700 West Flagler 160

Enter Florida street address

Miami

City

Florida

33174

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 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.

Cecilia Teran
If Changing Registered Agent, Signature of New Registered Agent

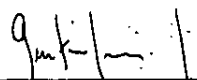
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|--------------------------------------|---|--|
| <u>MGR</u> | <u>EDUARDO DIEPPA</u> | <u>2095 WEST 76 ST</u> <u>HIALEAH FL 33016</u> | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| <u>MGRM</u> | <u>Carib.Trade & Dev.Co.Ltd.</u> | <u>8700 W FLAGLER ST SUITE 160</u> <u>MIAMI FL 33174</u> | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| <u>MGR</u> | <u>Rosa Maria Burgaleta</u> | <u>8700 W FLAGLER ST SUITE 160</u> <u>MIAMI FL 33174</u> | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| <u>MGR</u> | <u>SARAVIA, BURGALETA DANIELA</u> | <u>11382 NW 65 Street</u> <u>Miami FL 33178</u> | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |

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

Dated _____ 2010 _____



Signature of a member or authorized representative of a member

SARAVIA, GUSTAVO

Typed or printed name of signee