Page I of L

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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B. BOSTICK

EXAMINER

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CORPUSA

5/28/2014

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ARTICLES OF AMENDMENT 444000 105199 ARTICLES OF ORGANIZATION OF

EL PAJA CETE COMPANIED LIMITED LIMITED	UDAJO LLC	
(A Florida Limined	Liability Company)	<u></u>
The Articles of Organization for this Limited Liability Company Florida document number <u>L 100000 13775</u> .	were filed on Februar	5th 2010 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited linb	ility company here:	
The new name must be distinguishable and end with the words "Limited Link	ility Company," the designation	LLC or the abbreviation "LL.C."
Enter new principal offices address, if applicable:	N/A.	1 min
(Principal office address MUST BE A STREET ADDRESS)		- No.
	<u>.</u>	
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Enter new mailing address, if applicable:	N/A.	
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	
		<u>, , , , , , , , , , , , , , , , , , , </u>
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	ffice address on our reco e:	rds, enter the name of the new
Name of New Registered Agent:	N A	and the second s
New Registered Office Address:		
Enter Florida street ad		res
·		Florida
	City	Zip Cods
New Registered Agent's Signature, If changing Registered Agent		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, provided for in Chapter 60	and I am familiar with and 5, F.S. Or, if this document is
If Cha	nging Registered Agent, Signati	re of New Registered Agent
Page	1 of 3	

H14000135199 82/58/5014 16:43 302633686 If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member Address Title: Name Type of Action TIELES 1760 S.W. 139 PL MGR RAMON □ Add 🖾 Romove 🗆 Remove ☐ Add ___ Ramove _D Add : : .□ Remove _ Add _D Romove

Page 2 of 3

D.	If ame	andling any other information, enter change(s) here: (Attach additional sheets, if necessary.)	35144
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E,	(The office	ive date, if other than the date of filing: MA 1 28 th 2014 (optional) colive date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after	
	the date	er this document is filed by the Florida Department of State)	
	Dated	MA 4 28 th, 2014	
		Signature of a member or authorized representative of a member	
		NAIVU ANDRES NIEVES.	
		Typed or printed name of signee	

Page 3 of 3

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