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COVER LETTER

' TO:

TO: Registration : Division of C					
SUBJECT:	SUBJECT: 1335 Monad Terrace, LLC				
		ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are sul	omitted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
		Joseph A. Porrello			
		Name of Person			
	Joseph A. Porrello, P.A.				
		Firm/Company			
		P.O. Box 450249			
		Address			
	1	Miami, Florida 33245			
		City/State and Zip Code			
	E mail addraga.	to be used for future annual report notifi	ootion)		
For further information	concerning this matter, please of	·	eation)		
Jos	eph A. Porrello	at (<u></u> -)	374-0092		
Name	of Person	Area Code & Daytime	e 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)	Section 1 Status & Certificate of Status & Certified Copy (additional copy is enclosed)		
Regis Divis P.O.	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, FL 32314	STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 32	n ations nter Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

13 (<u>Name of the Limited</u> (A	35 Monad Liability Compa Florida Limited I	Terrace, LLC ny as it now appears of Liability Company)	n our records.)		
The Articles of Organization for this Limited Li Florida document numberL10000043	• • •	were filed on	April 23, 2010	and assig	ned
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name of	the limited liab	ility company here:			
The new name must be distinguishable and end wit "L.L.C."	h the words "Limi	ited Liability Company	" the designation "Ll	C" or the ab	oreviation
Enter new principal offices address, if applic	able:	1335 Monad Te	errace	16	NSE SEVIS
(Principal office address MUST BE A STREE		Miami Beach, F	lorida 33139	¥	OF SE
			•		<u>위됐</u> ;
Enter new mailing address, if applicable:		1335 Monad Te	rrace	PH 172	
(Mailing address MAY BE A POST OFFICE BOX)		Miami Beach, Florida 33139		ယ္	
D. If any older the material and and	··· ··· ··· ··· ·· · · · · · · · · · ·				the new
B. If amending the registered agent and/or registered agent and/or the new registered of			records, enter th	e name or	ine new
Name of New Registered Agent:			,		
New Registered Office Address:	1335 Mona	d Terrace			
TAN TAPINGTON OTHER TRANSPORT	Enter Florida street address				
	Miami Beach Florida		, Florida	33139	
		City	_	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.

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 = N MGRM =	Manager = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			— ~
			Add Remove
			Add Remove
			=,
			□ Damova
	ending any other informatio	n, enter change(s) here: (Attach additional sheets, if ne Stefania Scaffidi is:	ecessary.)
	1335 Monad Terrace, M	iami Beach, Florida 33139	
- -	April 6		
Dated	Дрііі О		
	Signat	Stefatia Scaff-di ure of a member or authorized representative of a member	
		Stefania Scaffidi Typed or printed name of signee	· ·

Page 2 of 2

Filing Fee: \$25.00