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APR 24 2017 S. YOUNG SECRETARY OF STATE TALLAHASSEE TLORIDA



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 24, 2017

MARIO VALDES 75 VALENCIA AVENUE 8TH FLOOR CORAL GABLES, FL 33134

SUBJECT: ALVAREZ, CARBONELL, COOKE, FELTMAN, DA SILVA, LLC

Ref. Number: L10000043961

We have received your document for ALVAREZ, CARBONELL, COOKE, FELTMAN, DA SILVA, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You talled to make the correction(s) requested in our previous letter.

An Individual must sign on behalf of the business entity you have designated as the registered agent.

Ithe specific purpose of the entity must be set forth in the document.

Section; 605:0203(4); Florida; Statutes; requires the document(s); to be signed by one person acting as an authorized representative:

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young Regulatory Specialist II

Letter Number: 117A00003021

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: A VAGEZ Carbonell Cooke Fetman & Da Silva, PLLC
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jorge L. Carbonell, Esq.
ACFD Registered Agents LLC
75 Valencia Ave # 800
Cora Gables FL 33/34
TLCCaCfd law. (om E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jorge L. Carbondl Esq at (305) 444-5885 Name of Person Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$60.00 Filing Fee,

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on 427 2010 and assigned
Florida document number <u>L 000043961</u>	' '
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
Alvarez, Cabonell, Cooke, Feltman The new name must be distinguishable and contain the words "Limited Liabi	M & Da Si Va PLLC ility Company," the designation "LLC" or the abbreviation "L.L.C."
	75 Valencia Avr. 4800
Enter new principal offices address, if applicable:	(0171 Gables F1 33134 -10
(Principal office address MUST BE A STREET ADDRESS)	COM CAUSIC , PT 10104
	3 2 7
	N/A 2 SEC
Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX)	P 177
	
	5 Bri
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	
	_
Name of New Registered Agent: ACFD	Registered Agents LLC nua Ave. #800
New Registered Office Address: 15 Vale	MGA ANC. #800 Enter Florida street address
	GUDIES, Florida 33/34 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 605, 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.

Agent, Signature of New Registered Agent

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member Title Title <u>Name</u> <u>Address</u> Type of Action _□ Add □ Remove _□ Change □ Add _□ Remove _□ Add □ **K**emo ☐ Cilang _□ Æ∏ü _□ Remove _□ Change _D Add _□ Remove _ Change □ Add □ Remove

_□ Change

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Filing Fee: \$25.00