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(Re	questor's Name)	
(Ad	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	пе)
(Do	cument Number)	
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2011 MAY 16 PN 12: 31
SECRETARY OF STATE
TALLAHASSEE, FLORID.

T. CLINE
MAY 17 2011
EXAMINER

COVER LETTER

то:	Registration S Division of Co					
SUBJE	ECT:	18850 SW 57	' AVE UNIT 302, LL	.C		
		Name of Lim	ited Liability Company			
		f Amendment and fee(s) are su condence concerning this matte	_			
			SERGIO ASTETE			
			Name of Person			
		D	IEPPA LAW FIRM, PA			
			Firm/Company			
			3611 SW 87 AVE			
			Address			
			MIAMI, FL 33165		=	
			City/State and Zip Code	,	ALL SEC	
		E-mail address:	ergioastete@live.com (to be used for future annual repo	art notification)	AH)	1000
For fur	ther information	concerning this matter, please		at notification;	2011 MAY 16 PH 12: 3: SECRETARY OF STATE	
	S	ergio Astete	at (786)	378-1484	F.S.	
		of Person	Area Code &	Daytime Telephone Number	PH Z 34	
Enclose	ed is a check for t	the following amount:		1		
	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certified	te of Status &	
		ING ADDRESS:	STREET/C	OURIER ADDRESS:		

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

18850 SW 57 AVE	E UNIT 302, L	LC	 	
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appear Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liability Company	were filed on	05/13/2010	and assigned	
Florida document numberL10000053811				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company her	<u>e</u> :		
18850 NW 57th Av	e Unit 302, LLC	,		
The new name must be distinguishable and end with the words "Limi "L.L.C."	ited Liability Compa	ny," the designation	"LLC" or the abbreviation	
Enter new principal offices address, if applicable:	3611 SW 87	Ave	1A 28	
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33	146		
			ASSS	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)			5 S 5	
			STE 34	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ur records, <u>ente</u>	the name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
		, Florida		
	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 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

<u> Citle</u>	<u>Name</u>	Address	Type of Action
			Add
			Add Remove
			Add Remove
			Add Remove
+++\$6+			Add Remove
		· 	Pladd 23
). If amen	eding any other information, enter	change(s) here: (Attach additional sheets, if nece	<u> </u>
_			PN 12: 34 OF STATE E. FLORIDA
<u></u>	·		
Dated	May 10,	2011.	
	Signature of a r	nember or authorized representative of a member Sergio Astete	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00