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ALLAHASSEE. FLORING

J. SAULSBERRY EXAMINER

SEP 2 4 2010

COVER LETTER

TO: Registration Division of C	Section Corporations				
SUBJECT:	HOPE 4 C	AD UC ted Liability Company			
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.			
Please return all corres	spondence concerning this matter	to the following:			
	<u>Jeane Ho</u>	Bobcq Name of Person			
	Ramon R	Cycs P. A. Firm/Company	•==i		
	5035 Palm	Address Address	ALLAHJ ————————————————————————————————————	2010 SEI	-Y]
	Hialcah,	FL 33012 City/State and Zip Code	ASSEE. FI	SEP 23 AH	
	Jeantle Dr E-mail address: (to be used for future annual report notifics	COM SE	## II: 3	O
For further information	n concerning this matter, please of	call:	TE TE	7	
Jeaneth	Lage of Person	at <u>205</u> <u>427-3</u> Area Code & Daytime	306 Telephone Number		
Enclosed is a check fo	r the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee Certificate of St Certified Copy (additional copy	atus &	sed)

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

	IOPE & CAD LLC			
(<u>Name of the Limited Lial</u> (A Flor	pility Company as it now appear rida Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Florida document number	• • •	6/10/10	and assign	ed
This amendment is submitted to amend the following	ıg:			
A. If amending name, enter the new name of the	limited liability company her	<u>'e</u> :		
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Compa	nny," the designation '	"LLC" or the abb	reviation
Enter new principal offices address, if applicable	:		2010 S	-
(Principal office address MUST BE A STREET A	DDRESS)		HM EP 23	11
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u> </u>		23 AH III 3.7 RY OF STATE REE. FLORIDA	
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, <u>enter</u>	the name of t	he new
Name of New Registered Agent:				
New Registered Office Address:	En	nter Florida street ac	ddress	
	. 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 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 Title Name <u>Address</u> Type of Action Yan Carlos Diaz Gomez MGR ✓ Add
☐ Remove 2016 Bay Drive, #308 Miami Beach, Fl 33141 ☐ Add Remove ☐ Add Remove Add Remove \prod Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 15 2010 Dated Signature of a member or authorized representative of a member Carlos A. Diaz Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00