

L10000065004

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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
17 MAR 13 PM 2:22

ALLAN M. GLASER, P.A.

**Biscayne Centre
Suite 807
11900 Biscayne Boulevard
Miami, Florida 33181**

ALLAN M. GLASER
ATTORNEY AT LAW

TELEPHONE (305) 893-5999
TELEFAX (305) 893-8251

March 8, 2017

Florida Department of State
Division of Corporation
Attn: Registration Section
P.O. Box 6327
Tallahassee, Florida 32314

Re: Inval America, LLC – Articles of Amendment
Florida Document No. L10000065004
Our File No. 2039-16

Dear Sir or Madam:

Enclosed please find the original and a copy of the Cover Letter and Articles of Amendment for INVAL AMERICA, LLC. Also enclosed is a check payable to Department of State in the amount of \$25.00 as your fee to file the Amendment. Please stamp the copy with the date of filing and return it in the enclosed self-addressed stamped envelope.

Should you have any questions or problems regarding this request, please do not hesitate to contact our office.

Cordially yours,



ALLAN M. GLASER

AMG/sr

Enc.

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TALLAHASSEE, FLORIDA
17 MAR 13 PM 4:22

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: INVAL AMERICA, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ADRIAN AYMERICH JR.

Name of Person

INVAL AMERICA LLC

Firm/Company

5523 NW 72ND AVENUE

Address

MIAMI, FLORIDA 33166

City/State and Zip Code

AAymerich@InvalAmerica.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ADRIAN AYMERICH JR.

305 632-4386
at ()

Name of Person

Area Code

Daytime 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) | ☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

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

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TALLAHASSEE, FLORIDA
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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

INVAL AMERICA, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06/17/2010 and assigned
Florida document number L10000065004.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

N/A/

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

N/A

New Registered Office Address:

N/A

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 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.

If Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	JUAN CARLOS LONDONO	5523 NW 72ND AVENUE	☐ Add
		MIAMI, FLORIDA 33166	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
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			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

THE REASON FOR THIS AMENDMENT IS THAT AN UNAUTHORIZED AMENDMENT WAS FILED ON
AUGUST 16, 2016, WHICH THE ACTUAL MANAGER/MANAGING PARTNER, ADRIAN AYMERICH JR.
JUST LEARNED OF. THAT AMENDMENT WAS NOT APPROVED BY THE MANAGING PARTNER,
AND IN FACT THE ADDRESS, EMAIL AND PHONE NUMBER WERE CHANGED SO THAT THE
MANAGER WOULD NOT KNOW OF THAT AMENDMENT. THAT AMENDMENT WAS SIGNED BY AN
UNAUTHORIZED PERSON.

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E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

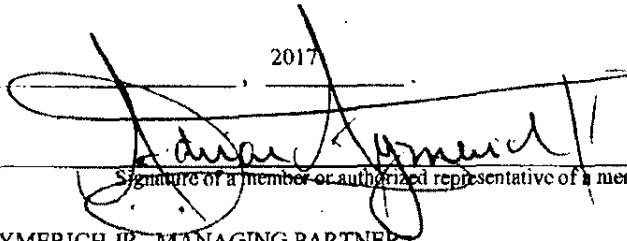
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated MARCH 8,

2017



Signature of a member or authorized representative of a member

ADRIAN AYMERICH JR., MANAGING PARTNER

Typed or printed name of signer