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SECRETARY OF STATE

T. CLINE

JUL 3 1 2012

**EXAMINER** 

## **COVER LETTER**

TO: Registration S Division of Co				
SUBJECT:	SUIZA PROPERT	TY CONDOMINIUN	I, LLC	
	Name of Lim	ited Liability Company		•
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	ondence concerning this matter	r to the following:		
		BIANCA SAPORITTO		
		Name of Person		
	TEAM REA	L ESTATE MANAGEN	MENT LLC	
		Firm/Company		
	2801 NE 208	TH TERRACE, SECO	ND FLOOR	
		Address		
	Д	VENTURA, FL 33180		
	City/State and Zip Code			21 ms
		TEAMREMANAGEME		- C
		to be used for future annual repo	ort notification)	MIZ JUL 30 SECRETAK)
For further information	concerning this matter, please	call:		S S S S S S S S S S S S S S S S S S S
BIAN	CA SAPORITTO	at ( 305 )	454-0915	
Name	of Person	Area Code &	Daytime Telephone Number	TORION C
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 er	nclosed) Certified (	of Status &

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

SUIZA PROPE	RIY CONDOMINII	JM, LLC		
(Name of the Limited Liabili (A Florida	a Limited Liability Company)	ars on our records.)		
The Articles of Organization for this Limited Liability Florida document number	Company were filed on	06/21/2010	_ and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	mited liability company he	e <u>re</u> :		
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Comp	pany," the designation "LL	C" or the abbreviation	
Enternamental officer address if ambiables			FACE BE	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADL	<u> </u>		To Z	
			28 8 F	
Enter new mailing address, if applicable:	<del></del>			
(Mailing address MAY BE A POST OFFICE BOX)			73 P	
	,		76	
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		our records, enter the	name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	E	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	VILLARD, OLIVERIO A	2801 NE 208TH TERRACE SECOND FLOOR AVENTURA, FL. 33180	Add  ✓ Remove
MGRM	VILLARD, PATRICIO A	2801 NE 208TH TERRACE SECOND FLOOR AVENTURA, FL. 33180	Add  Remove
MGRM	VILLARD BRAND, MICAEL	2801 NE 208TH TERRACE SECOND FLOOR AVENTURA, FL. 33180	Add Remove
MGRM	VILLARD HANENCLIEVER	2801 NE 208TH TERRACE SECOND FLOOR AVENTURA, FL. 33180	Add  Remove
MGR_	TEAM REAL ESTATE MANAGEMENT, LLC	2801 NE 208TH TERRACE SECOND FLOOR AVENTURA, FL. 33180	Add Add Add Add Add Add Add Add Add
	ing any other information, enter chang MOVING ALL MGRM'S AND ADI	e(s) here: (Attach additional sheets, if necess	
Dated ·	bar ~	<u>112</u> .	
		or authorized representative of a member	
		NCA SAPORITTO or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00