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(Requ	iestor's Name)	
(Addr	ess)	
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(City/s	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Na	me)
(Docu	ıment Number)
Certified Copies	Certificate	s of Status
Special Instructions to Fil	ling Officer:	

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13 JUN 24 AH 7: 5

NVISION OF CORPORATIONS

JUN 2 5 2013 T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

ISABEL HOME INVESTMENT

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:

L10000068160

arne of Person

Firm/Compan

8800 NW 107TH CT BLDG 10 APT 205

Address

DORAL, FL 33178

City/State and Zip Code

KIKESILVA, FL 33178

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

For further information concerning this matter, please call:

EDGAR BUJOSA

954 854-5359

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

Cl\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) U\$60.00 Filing Fec, 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



RECEIVED

13 JUN 24 AM 6: 46

SECRETARY OF STATE TALLAHASSEE, FLORIDA

May 17, 2013

EDGAR BUJOSA 8800 NW 107TH CT BLDG 10 - APT 205 DORAL, FL 33178

SUBJECT: ISABEL HOME INVESTMENT, LLC

Ref. Number: L10000068160

We have received your document for ISABEL HOME INVESTMENT, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of 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.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 513A00012469

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE
DIVISION OF CORPORATION

ISABEL HOME INVESTMENT, LLC

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

(A Florida Limited Liability Company)

•	(** Ariad Dimino Diagring Company)	SS 88
The Articles of Organization for this Limited	Liability Company were filed on 06/2	
Florida document number L10000068160	· · · · · · · · · · · · · · · · · · ·	;
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company here	:
The new name must be distinguishable and end w	rith the words "Limited Liability Compan	y," the designation "LLC" or the abbreviation
Enter new principal offices address, if appli	icable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
D		,
Enter new mailing address, if applicable:		f
(Mailing address MAY BE A POST OFFICE	(<u>BOX)</u>	

B. If amending the registered agent and registered agent and/or the new registered of		ir records, enter the name of the new
Name of New Registered Agent:	JAKSEN E. SILVA	!
New Registered Office Address:	8800 NW 107TH CT BLDG	10 APT 205
	Ente	r Floridå street address
	DORAL	, Florida 33178
	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, thereby confirm that the limited liability company has been notified in writing of this change.

Changing Registered Agent, Signature we New Registered Agent

Pagell of 3

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	Address	Type of Action
MGR	EDGAR BUJOSA	8800 NW 107TH CT	
		BLDG 10 APT 205	Remove
		DORAL, FL 33178	
MGR	JAKSEN E. SILVA	8800 NW 107TH CT	Add
		BLDG 10 APT 205	Remove
		DORAL, FL 33178	
		:	Add
		i t	Remove
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		:	SECRE SECRE Address Ad
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		-	7. See 10. See
			RATIONS 7:59
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amending any other informatio	on, enter change(s) here: (Attach ac	dditional sheets, if necessary.)
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		-
		;
April 22	2013	
	Profe Se.	; ;
Signa EDGAR BUJOSA	ture of a member or authorized represer A	ntative of a member
	Typed or printed name of sign	nee
	Pogo 3 of 3	

Filing Fee: \$25.00

13 JUN 24 AM 7: 58