L10000101417

(Requestor's Name)			
(Address)			
(Address)			
(City/S	State/Zip/Phon	e #) .	
PICK-UP	☐ WAIT	MAIL.	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificate	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



900251823889

09/24/13--01008--008 **25.00

ZOUS SEP 24 PH I2: 36

SEP 2 5 2013

COVER LETTER

TO:

Registration Section

Division of Corporations

SUBJECT:

90 SW 3 ST UNIT #7, 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:

JEANNETTE MARTINEZ

Name of Person

90 SW 3 ST UNIT #7, LLC

Firm/Company

1820 SW 3RD AVE

Address

MIAMI, FL 33129

City/State and Zip Code

PLUZQUINOSF@HOTMAIL.COM

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

For further information concerning this matter, please call:

PEDRO LUZQUINOS

954,655-8413

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

90 SW 3 ST UNIT #7, 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 and assigned Florida document number L10000101417					
This amendment is submitted to amend the follow	owing:				
A. If amending name, enter the new name of	the limited liabilit	y company here:			
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited	Liability Company," the design	nation "LLC" or	the abbreviation	
Enter new principal offices address, if applic	able:		٠.		
(Principal office address MUST BE A STREE	T ADDRESS)		<u> </u>	15.0	
	_			EPROPERTY.	
			22 GE 32 GE 76 AU	D CAMPA	
Enter new mailing address, if applicable:			85	2	
(Mailing address MAY BE A POST OFFICE	rivalit critical and an account of the late	200	2 11		
			10.0	75	
B. If amending the registered agent and/oregistered agent and/or the new registered of		e address on our records,	enter the nan	ယ တ ne of the new	
Name of New Registered Agent:	JEANNETTE	MARTINEZ			
New Registered Office Address:	1820 SW 3RI	D AVE			
	Enter Florida street address				
	MIAMI	Flo	rida <u>33129</u>		
		City	Zip (Code	
New Registered Agent's Signature, if changing F	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

ě

<u>Title</u>	Name	Address	Type of Action
MGRM	CHAVEZ, GUSTAVO	1820 SW 3RD AVE	Add
		MIAMI, FL 33129	Remove
MGRM MA	MARTINEZ, JEANNETTE	1820 SW 3RD AVE	Add
		MIAMI, FL 33129	Remove
			Remove
			SEP Z4
			PHIZ: 36
			Add
			Remove
			Add
			Remove

D. If amending any other information, enter	er change(s) here: (Attach additional sheets, if necessary.)
•	
•	
ated SEPTEMBER 19	2013
	·
Jean	H D. J
Signature of a	member or authorized representative of a member
JEANNETTE MARTI	NEZ
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

ZOTO SEP 24 PM IZ: 36