L10000103613

(Rec	questor's Name)	
(Add	lress)	
(Ado	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	·
4		

Office Use Only



400253932954

12/06/13--01030--004 **25.00

2013 DEC -6 PM 3: 33
SEGRETARY OF STATE.
TALLAHASSEF FI DOING.

DEC 0 9 2013

COVER LETTER

TO: Registration Section
Division of Corporations

AVENIDA LEGAL, 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:

ANTONIO E. REGOJO

Name of Person

REGOJO LAW, P.A.

Firm/Company

3550 BISCAYNE BLVD. SUITE 507

Address

MIAMI, FLORIDA 33137

City/State and Zip Code

Info @ Avenida Lega L. com
E-mail address: (to be used for future abdual report notification)

For further information concerning this matter, please call:

ANTONIO E. REGOJO

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

AVENIDA LEGAL, LLC				
(Name of the Limited	l Liability Compa A Florida Limited I	ny as it now appears on our l Liability Company)	records.)	
The Articles of Organization for this Limited L Florida document number <u>L1000010361</u>	iability Company	were filed on 10/04/20	and assigned	
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name of	of the limited liab	oility company here:		
The new name must be distinguishable and end wi "L.L.C."	ith the words "Lim	ited Liability Company," the d	esignation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		3550 BISCAYNE BLVD. SUITE 507		
(Principal office address MUST BE A STREET ADDRESS)		MIAMI, FLORIDA 33137		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	'ROX	3550 BISCAYNE MIAMI, FLORIDA	BLVD. SUITE 507 33137	
B. If amending the registered agent and/registered agent and/or the new registered o	or registered of		rds, enter the name of the new	
Name of New Registered Agent:	ANTONIC	E. REGOJO	E III	
New Registered Office Address:	3550 BIS	CAYNE BLVD SUIT	E 507 B	
	MIAMI		Florida 33137	
		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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

Titla	Nama	Addwara	Type of Action
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Add
			Remove
			Remove
		-	
			Add
			Adu
			Remove
			Kemove
			Add
			Remove
P		<u></u>	Add
			Remove
		> 2	. 623
		T.S.	
		ALLAHASSE	Apid
		iii e	Remaye 33
		<u> </u>	Remove
		<u> </u>	ယ
			·_
·			Add
			—
			_ Remove

. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
-	
_	
ted	11/20 ,2013
	Signature of a member or authorized representative of a member
	ANTONIO Reguio
	Liped or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

ZIII DEC -6 PM 3: 3: