210000124219

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400254022784

11/22/13--01036--005 **25.00

2013 NOV 22 PM 4: 07
OF THE LARY OF STATES
AND ASSESSED FOR INC.

NOV 2 5 7079 D. BRUCE

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: WIND MARIO, 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:

Daniel J. Serber

Name of Person

Serber & Associates, P.A.

Firm/Company

2875 NE 191st Street, Suite 801

Address

Aventura, FL 33180

City/State and Zip Code

info@serberlawfirm.com

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

For further information concerning this matter, please call:

Danilo Jimenez

305 932-6262

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) Certificate of Staffix & 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

WIND MARIO, LLC	•	
(Name of the Limited Lia (A Flo	bility Company as it now appears on our ride Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liabil Florida document number L10000126219		and assigned
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the "1L.C."	words "Limited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX B. If amending the registered agent and/or n		2013 NOV 22 PH
registered agent and/or the new registered office		orus, enter the name of the new (
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flor	ida street address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Regis	tered Agent:	
I hereby accept the appointment as registered ag the provisions of all statutes relative to the prope accept the obligations of my position as registere being filed to merely reflect a change in the regis company has been notified in writing of this chan	er and complete performance of my o ed agent as provided for in Chapter of stered office address, I hereby confir	luties, and I am familiar with and 608, F.S. Or. if this document is

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 MGRM = Managing Member Title Name <u>Address</u> Type of Action MGR Galante, Rafael M 1180 A East Hallandale Beach Blvd HALLANDALE BEACH BLVD, FL 33009 Remove MGR S & A Company Management, LLC 2875 NE 191st Street, Suite 801 Aventura, FL. 33180 Remove

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	The management of the Limited Liability Company is reserved to the members
	·
Dated _	November 20 th ,2013
	Signature of a member or authorized representative of a member
	Rafael M Galante – Manager Typed or printed name of signee

Page 3 of 3

2013 NOV 22 PH 4: 07