1000	0131713
(Requestor's Name) (Address)	700263670557
(Address) (City/State/Zip/Phone #)	09/12/1401023001 **1660.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	2014 SEP 12 PM SECRETARY OF S TALLEAHASSEE, FU
Special Instructions to Filing Officer:	SEP 1 7 2014 T CLINE
' Office Use Only	

.

•			COVER LETTER		يندر چر	·•
<b>TO:</b>	Registration Se Division of Con				e a	
SUBJE	ст·	7909 & 791	1 NW 64 ST, LLC			
SCBCL	en		ted Liability Company			
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please re	eturn all correspo	ondence concerning this matter	to the following:			
			Carmen Fanego		2011 FAL	
			Name of Person		LAN CRE	a surgery and a second s
			TotalBank		P 12	n marti 200 € 20052016 <sup>™</sup> }
Firm/Company				ř K	TE:	
100 SE 2nd Street, 32nd Floor				PH 1: 1 OF STATE E. FY ORM	ι.	
Address						
			Miami, FL 33131		¥ 4.	
			City/State and Zip Code			
		Cfa	anego@totalbank.com to be used for future annual report notificat	ion)		
For furt	her information c	concerning this matter, please c	·	,		
	Car	rmen Fanego	<sub>at (</sub> 305 ) 47	6-6269		
	Name o	of Person	Area Code & Daytime Te	elephone Number		
Enclose	d is a check for t	he following amount:				
	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	
	MAIL	ING ADDRESS:	STREET/COURIER	ADDRESS		
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ration Section	Registration Section Division of Corporation			
		ox 6327	Clifton Building 2661 Executive Cente Tallahassee, FL 32301	r Circle		

,

حت

.

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

7909	& 7911 NW	/ 64 ST, LL	С		
( <u>Name of the Limited Liz</u> (A Flo	a <mark>bility Company</mark> orida Limited Lia	<u>as it now appea</u> bility Company)	<u>rs on our records.</u> )		
The Articles of Organization for this Limited Liabi	lity Company w	vere filed on	12/28/2010	and assigned	
Florida document number L1000013177	<u>′3</u>				
This amendment is submitted to amend the followi	ng:				
A. If amending name, <u>enter the new name of th</u>	e limited liabili	ity company he	r <u>e</u> :	2014 SECRE	
The new name must be distinguishable and end with th "L.L.C."	ne words "Limite	d Liability Comp	any," the designation "L		
Enter new principal offices address, if applicabl	e:	100 SE 2nd	Street, 32nd Floor	<u> </u>	
(Principal office address MUST BE A STREET A	<u>ADDRESS)</u>	Miami, FL_3	3131	DATE F	
Enter new mailing address, if applicable: ( <u>Mailing address MAY BE A POST OFFICE BO</u>	<u>X)</u>	100 SE 2nd 3 Miami, FL 33	Street, 32nd Floor 3131		
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:	e address here:			he name of the new	
New Registered Office Address:	100 SE 2nd Street, 32nd Floor Enter Florida street address				
		Miami		33131	
-		City	, Florida	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 605 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

Page 1 of 2

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

\_\_\_ .\_\_

## MGR = Manager MGRM = Managing Member

-

<u>Title</u>	Name	Address	Type of Action
			Add Remove
	<u>.</u>		
			HINDOVE
			Remove
	 		Add Remove
<del></del>			Add Remove
			Add Remove
D. If a	mending any other information, enter ch New address for all the MGRs:	nange(s) here: (Attach additional sheets, if necessar	y.)
	100 SE 2nd Street, 32nd Floor		
	Miami, FL 33131		
Dated _	August 12	2014	
	Signature of a me	moer or authorized representative of a member Carmen Fanego	
	T	yped or printed name of signee	
		Page 2 of 2	
		Elling East \$25.00	

Filing Fee: \$25.00