1100000943

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
·	-	
(Do	cument Number)	
,	,	
Certified Copies	Certificates	of Status
	·	
Special Instructions to	Filing Officer:	

Office Use Only



200230981382

04/24/12--01026--009 **25.00

2012 APR 24 APIL: 26
SECRETARY OF STATE
ALLAHASSEE, FLORIOA

T. CLINE
APR 2 5 2012
EXAMINER

Registration Section Division of Corporations

COVER LETTER

SUBJECT:	Lie	ontel LLC			
	Name of Lim	ited Liability Company			
The enclosed Articles of	f Amendment and fee(s) are sul	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
		Robert J. Fernandez			
		Name of Person		- -	
		Liontel			
		Firm/Company		-	
		10500 SW 108 B101		₩	
		Address			
				A & 30	- H.
		Miami, FI 33176		APR 24 RETARY AHASSI	सीर भाग स. सन्दर्भ
		City/State and Zip Code		- 255 - 135 - 1	Emer.
	R	obertjf07@gmail.com		P.F.S	700000
	E-mail address: (to be used for future annual repo	rt notification)		. 1421 5247
For further information	concerning this matter, please of	all:		DE B	
		di ana ana		•	
	rt J. Fernandez	at (_305_)	772-7751		
Name	of Person	Area Code & I	Daytime Telephone Numb	er	
Enclosed is a check for t	he following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certifie	iling Fee, cate of Status & ed Copy onal copy is enclo	osed)

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

Lionte	I LLC		
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appea Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company			
Florida document numberL1100000963			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company her	<u>re</u> :	
Lion Capital Inve			
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Compa	any," the designation	n "LLC" or the abbreviati
Enter new principal offices address, if applicable:	10500 S.W.	108 AVE. SUIT	E_B101
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33	3176	FE E
			ALT A
			SE SE
Enter new mailing address, if applicable:	10500 S.W. 1	108 AVE. SUITI	E\$\fo1 \cdot \text{T}
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33	3176	
			Chi 'e
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, <u>ente</u>	er the name of the ne
Name of New Registered Agent:			
New Registered Office Address:			
•	En	ter Florida street d	address
 , , , , , , , , , , , , , , , , ,		, Florida	
	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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Robert J. Fernandez	10500 S.W. 108 AVE. Suite B101 Miami, Fl 33176	
			Add Remove
<u>.</u>			Add Remove
<u>.</u>			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter c	hange(s) here: (Attach additional sheets, if necessar	2012 APR 24 SECRETARY
		SE FLORI	9 > 17
	April, 11	2012	— —
Dated	X IIII	2012	
	Signature of a me		
	T	Perla Escobar yped or printed name of signee	· · · · · · · · · · · · · · · · · · ·

Page 2 of 2

Filing Fee: \$25.00