

211000011967

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

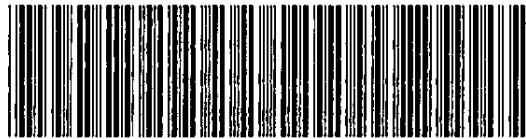
Special Instructions to Filing Officer:

A. LUNT

FEB - 9 2010

EXAMINER

Office Use Only



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02/07/11--01009--019 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 FEB - 7 PM 1:34

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LAW OFFICES

JOSEPH A. PORRELLO, P.A.

2200 South Dixie Highway, Suite 702-A, Miami, Florida, 33133 (305) 374-0092 fax (305) 514-0045

Please send all correspondence to: P.O. Box 450249 Miami, Florida 33245

JOE@PORRELLOLAW.COM

February 2, 2011

VIA U.S. MAIL

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

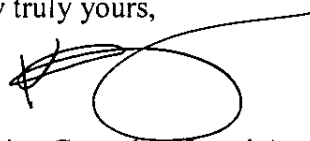
Re: Cruz Family Management Company, LLC - Articles of Amendment

To Whom It May Concern:

Please find enclosed a completed Articles of Amendment form and \$25.00 filing fee for our client's company, Cruz Family Management Company, LLC.

Should you have any questions with regard to this matter, please do not hesitate to contact us.

Very truly yours,



Kristina Gonzalez, Legal Assistant

Enc: as stated.

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: Cruz Family Management Company, 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:

Joseph A. Porrello

Name of Person

Joseph A. Porrello, P.A.

Firm/Company

P.O. Box 450249

Address

Miami, Florida 33245

City/State and Zip Code

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Kristina Gonzalez

Name of Person

at (305)

374-0092

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**

Cruz Family Management Company, 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 1/28/2011 and assigned
Florida document number L11000011967.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street 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 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:

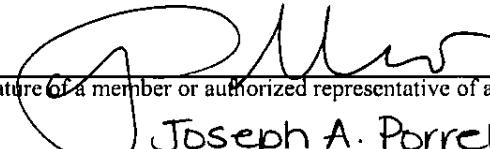
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Yenisey Cruz	18671 SW 39th Court	<input checked="" type="checkbox"/> Add
		Miami, Florida 33029	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

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 21 FEB 2 PM 1:33
 CLERK OF DISTRICT COURT
 MIAMI, FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated _____


 Signature of a member or authorized representative of a member
 Joseph A. Porrello, Esq.
 Typed or printed name of signee