## Florida Department of State

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MARCELL FELIPE, P.A.

Account Number : I20110000064 Phone : (305)381-8500 Fax Number : (305)381-6225

\*\*Enter the email address for this business entity to be used for future  $\widetilde{eta}$  annual report mailings. Enter only one email address please.\*\*

Email Address: nmunoz@marcellfelipe.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BANFF HOLDINGS, LLC

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Natalia Munoz

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H14000091541:3 OF STATE TALLAHASSEC, FLORIDA

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BANFF HOLDINGS, LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) billity Company)	
The Articles of Organization for this Limited Liability Company w	ere filed on 2/21/2011	and assigned
Florida document number L11000022084		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
The new name must be distinguishable and end with the words "Limited Liabili	ly 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)	<del> </del>	
		<del></del>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office address here:	ce address on our records, <u>en</u>	ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	Zip Code
Nam Desistand Agent's Signature If shanging Desistand Agents	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 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 3

MGR = Manager

AMBR = Authorized Member

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

<u>Title</u> MGR	Name  GRACIELA BEATRIZ MORENO DE BIANCHI	Address	Type of Action
			Add B Remove
MGR	Osvaldo Bianchi	304 INDIAN TRACE #296	Add
		WESTON, FL 33326	Remove
			[3] Add
			□ Remove
	<del></del>		_D Add
			Remove
			_CI Add
			_□ Remove
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			_D Remove

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Natalia Munoz

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