

L1100002717a

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

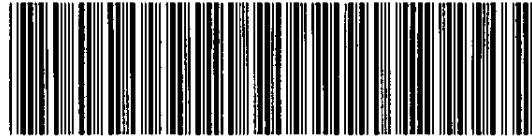
(Business Entity Name)

(Document Number)

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FILED
2015 JUL 16 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ms. Sullivan JUL 17 2015

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: FLORIDA ANGELS INVESTMENTS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALBERTO MIQUEL

Name of Person

MIQUEL ACCOUNTING SERVICE, INC.

Firm/Company

5100 S. DIXIE HWY., SUITE 10

Address

WEST PALM BEACH, FLORIDA 33405

City/State and Zip Code

MIQUEL1951@aol.com

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

For further information concerning this matter, please call:

ALBERTO MIQUEL

561

588-8878

at

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$50.00 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

15 JUL 16 PM 3:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 7, 2015

ALBERTO MIQUEL
5100 S. DIXIE HIGHWAY
SUITE 10
WEST PALM BEACH, FL 33405

SUBJECT: FLORIDA ANGELS INVESTMENTS , LLC
Ref. Number: L11000027172

We have received your document for FLORIDA ANGELS INVESTMENTS , LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan
Regulatory Specialist II

Letter Number: 115A00014161

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
2015 JUL 16 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA ANGELS INVESTMENTS 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 03/04/2011 and assigned
Florida document number L11000027172

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 contain 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)

5100 S. DIXIE HWY.

SUITE 10

WEST PALM BEACH, FL. 33405

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:

ALBERTO MIQUEL

New Registered Office Address:

5100 S. DIXIE HWY., SUITE 10

Enter Florida street address

WEST PALM BEACH

Florida 33405

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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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		_____	<input type="checkbox"/> Change

11-11-11

FILED
2015 JUL 16 AM 9:01
ST. JOSEPH, MO
CLERK OF COURT

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

(b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

MGRM

JORGE PERALLI

Typed or printed name of signer