

L11 0000 30907

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

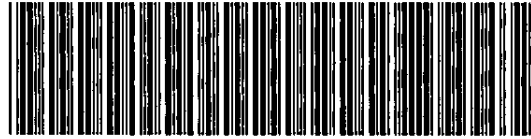
(Business Entity Name)

(Document Number)

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T. CLINE
DEC 10 2012
EXAMINER

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 DEC -7 PM 1:01

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ITB PORTO BELAGGIO 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:

Barbara Sanjurjo, Esq.

Name of Person

BARBARA SANJURJO PA

Firm/Company

2630 SW 28TH STREET, SUITE 61

Address

COCONUT GROVE, FL 33133

City/State and Zip Code

luiseoane@gmail.com

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

For further information concerning this matter, please call:

Barbara Sanjurjo

Name of Person

at **305 370-3990**

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ITB PORTO BELAGGIO 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 MARCH 10 2011 and assigned Florida document number L11000030907.

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)

150 SUNNY ISLES BOULEVARD
TOWER 1-AP 901
SUNNY ISLES BEACH, FL 33160

FILED
2011 DEC -7 PM 1:01
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: Barbara Sanjurjo Esq.

New Registered Office Address: 2630 SW 28TH STREET, SUITE 61
Enter Florida street address

COCONUT GROVE, Florida 33133
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>
MGRM	LUIS E. SEOANE	3001 NE 185 STREET	<input type="checkbox"/> Add
		APT 211	<input checked="" type="checkbox"/> Remove
		AVENTURA FL 33180	
MGR	LUIS E. SEOANE	150 SUNNY ISLES BLVD	<input checked="" type="checkbox"/> Add
		TOWER 1-AP 901	<input type="checkbox"/> Remove
		SUNNY ISLES BEACH FL 33160	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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 TALLAHASSEE FLORIDA

