(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Statu	s
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2013 OCT 23 PH 4: 32

B. BOSTICK OCT 2 4 2013 EXAMINER

COVER LETTER

TO: Registration Section Division of Corpo			
SUBJECT: FIC	ONTO CIPOLIS Name of Limite	ed Liability Company	
The enclosed Articles of An	nendment and fee(s) are subt	mitted for filing.	
Please return all correspond	ence concerning this matter t	to the following:	
	Daniel	Name of Person	
		Firm/Company	APACAL TO 19 19 19 19 19 19 19 19 19 19 19 19 19
	1953 SW 15	5th St. #U9 Address	
	Doerfled B	500Ch, PL 33442 City/State and Zip Code	
	F-mail address: (to	o be used for future annual report notification	
For further information con	cerning this matter, please ca	il:	
Danielle Name of Pe	Maciel / Jami	at (<u>818) 203 - 93</u> Area Code & Daytime Te	3\0 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Enclosed is a check for the f	ollowing amount:		CT 23
S.	□\$30.00 Filing Fee &	□\$55.00 Filing Fee &	□\$60.00 Filing Fee,
, 5	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status &
		(additional copy is chclosed)	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**

(Name of the Limited Liability Compa	ny as it now appears on our records.)	
(A Florida Limited I	Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 3/31/2011	and assigned
Florida document number <u>L11000038904</u> .		20
This amendment is submitted to amend the following:	The state of the s	13 UC 1 23
A. If amending name, enter the new name of the limited liab	mitted to amend the following , enter the new name of the limited liability company here: istinguishable and end with the words "Limited Liability Company," the designation "LIC" or the abbreviation of the limited Liability Company," the designation "LIC" or the abbreviation of the standard standa	
		<u> </u>
L.L.C."	ned Liability Company, the designation 1210	or due appreviation
Enter new principal offices address, if applicable:	1953 SW 15th St. #69	
(Principal office address MUST BE A STREET ADDRESS)		33442
		
Enter new mailing address, if applicable:	1953 SW 15th St. #60	À
(Mailing address MAY BE A POST OFFICE BOX)	Doerfield Beach ifl ?	33442
B. If amending the registered agent and/or registered of	fice address on our records, <u>enter the</u> :	name of the new
registered agent and/or the new registered office address her		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Florida	
		Lip 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>	Name	Address	Type of Action
MGR	Jamil Maria	1953 SW 15th St. #109	Add
	(Jamil Maciel)	Doorfield Booch, FL 33442	Remove
			Add
			Remove
<u>.</u>			
		ALC:	Remove
		\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	- ☐ Add
		7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Remove
			Add
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			Add
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	Phillow
<u></u>	Signature of a member or authorized representative of a member
	Danielle Macle 1
	Typed or printed name of signee
	Page 3 of 3

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