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11 MAY 16 PM 4: 28
SECRETARY OF STATE
ALL AHASSEE, FLORID

J. BRYAN
MAY 1 7 2011

**EXAMINER** 

## **COVER LETTER**

Division of Corporations	
SUBJECT: Mis Ranchos 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:	SECRETARION TO THE PARTY OF THE
Karina L. Pruschetti Name of Person	PH 4: 28
Team Real Estate Management Firm/Company  2801 NE 208th Ferrace 2 hd Floor Address	
Aventura - FL- 33180  City/State and Zip Code  Karina @ teamremanemen  E-mail address: (to be used for future annual report notification)	t.com
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:	
Name of Person at (305) 914-4845  Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certified	te of Status &
	•

MAILING ADDRESS:

TO:

**Registration Section** 

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

Mis K	anchos LLC	
( <u>Name of the Limited L</u> (A F	iability Company as it now appears on o lorida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liab		04/2011 and assigned
Florida document number <u>L/1/0000 529</u>	<u>417</u> .	, , , , , , , , , , , , , , , , , , ,
This amendment is submitted to amend the follow		TILLED
A. If amending name, enter the new name of the	he limited liability company here:	彩 星 口
The new name must be distinguishable and end with t	de la	
L.L.C."	the words "Limited Liability Company," tr	ne designation "LLC" of the althory viation
Enter new principal offices address, if applicab	le:	
Principal office address MUST BE A STREET.	ADDRESS)	
Enter new mailing address, if applicable:		
<u>Mailing address MAY BE A POST OFFICE BO</u>	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our re e address here:	cords, enter the name of the new
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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

j

MGR = Manager

MGRM = Managing Member

Title Name Address Type of Action

MGRM Christian Tinkelbag 156 Cameron CT PAdd Weston- FL 33326 Remove

Add Remove

Dated May 13

Signature of a member of authorized representative of a member

Signature of a member of authorized representative of a member

Remove

∏Add ∏Remove

∏Add

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00