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(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
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(Business Entity Name)	
(Document Number)	
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	D. SCOTT

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## **COVER LETTER**

TO: Registration Section Division of Corporations

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REAL ESTATE SUBJECT: Name of Limited Liability Company

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The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	JOSE CUEUA
	Name of Person
	TS Advisors LLC
	Firm/Company
	2828 Cosal Way, #310
	Address
	Miami, FL 33145
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For further information cond	erning this matter, please call:
Toge wer	a 733 1366
Name of Pe	arson 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

ARTICLES	OF AMENDMENT TO			
ARTICLES OF ORGANIZATION				
	OF			
MILI REAL				
	Company as it now appears on our records.) nited Liability Company)			
The Articles of Organization for this Limited Liability Com Florida document number <u>L1100006903</u>	pany were filed on $\underline{OG11312011}$ and assigned 1			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	l 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:	2828 CORAL Way # 310			
(Principal office address MUST BE A STREET ADDRES	151 Miandy, FL 33145			
Enter new mailing address, if applicable:	2528 Coval Way #310			
(Mailing address MAY BE A POST OFFICE BOX)	Millyr, FL 33145 =			
	ed office address on our records, enter the, name of the new			
registered agent and/or the new registered office addres				
Name of New Registered Agent: 15	Advisors LLC			
New Registered Office Address: 2523	Enter Florida street address			
Mil	Cotal Way # 310 Enter Florida street address Celi Florida 33145			
	City Zip Code			
New Registered Agent's Signature, if changing Registered A				
provisions of all statutes relative to the proper and com accept the obligations of my position as registered ager	d agree to act in this capacity. I further agree to comply with the aplete performance of my duties, and I am familiar with and nt as provided for in Chapter 605, F.S. Or, if this document is office address, I hereby confirm that the limited liability			

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If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each yerson want a د or removed from our records:

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MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Rodriguez Peria Maria I	PO Box 452836	🖸 Add
	•	PO Box 452836 Milaui, FL 33245	Remove
			Change
MGR	Rimondi, María F	2525 Calal Way #310 Miller, FL 33145	Add
		Mileel, FL 33145	🗆 Remove
		······	D Change
		·	🗆 Add
			C Remove
			Change
			🖸 Add
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		≥8.1	Change
			Add
			<u>N</u> □ Change
			Add
			Remove
			Change

Page 2 of 3

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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fective date, if other than the date of filing:	(ontional)

(3)(b) (II Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. E.m. တ

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated . Signature of a member or authorized representative of a member 1.Pead Rodriguez Aldunia Garcelo Typed or printed name of signee

Page 3 of 3 Filing Fee: \$25.00