

L110000070218

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(City/State/Zip/Phone #)

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2011 OCT -4 AM 8:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

OCT -6 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BEST Mojito 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:

ANTONIO TURBAY VALLEJO
Name of Person

BEST MOJITO LLC
Firm/Company

90 SW 3 street UN 2808
Address

MIAMI, FL 33130
City/State and Zip Code

turbayv@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTONIO TURBAY at (305) 9090810
Name of Person 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

11 OCT -4 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

September 12, 2011

ANTONIO TURBDY
90 SW 3 ST
2808
MIAMI, FL 33130

SUBJECT: BEST MOJITO, LLC
Ref. Number: L11000070218

We have received your document for BEST MOJITO, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 411A00021059



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
11 SEP 30 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

September 30, 2011

ANTONIO TURBAY
90 SW 3 ST
2808
MIAMI, FL 33130

SUBJECT: BEST MOJITO, LLC
Ref. Number: L11000070218

We have received your document for BEST MOJITO, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 911A00022554

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2011 OCT -4 AM 8:55

BEST MOJITO LLC

BEST MOJITO, LLC SECRETARY OF STATE
(Name of the Limited Liability Company as it now appears on our records) TALLAHASSEE, FLORIDA
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06-16-2011 and assigned
Florida document number L11000070218.

This amendment is submitted to amend the following:

Buenavista Investment Holding LLC

A. If amending name, enter the new name of the limited liability company here:

Buenavista Investment Group LLC

BUENAUISTA INVESTMENT, LLC

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)

10 NE 40 ST.
MIAMI, FL 33137

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

10 NE 40 ST.
MIAMI, FL 33137

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:

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 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.	ANDRES ARDILA.	TRANV 20 H 94-25 UNIT 203, B2926, DC 0000 CO	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated _____

Signature of a member or authorized representative of a member
ANTONIO TURBAY VALLEJO

Typed or printed name of signee

FILED
2011 OCT -4 AM 8:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA