

L11000072617

Division of Corporations

Florida Department of State

Division of Corporations
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Division of Corporations
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From:

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
W 1113, LLC**

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TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS

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JAN - 2 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: W 1113, 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:

Michael Sherman

Name of Person

Thomas C. Sherman, P.A.

Firm/Company

90 Aimeria Avenue

Address

Coral Gables, Florida 33134

City/State and Zip Code

mike@uniontitleservices.com.

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

For further information concerning this matter, please call:

Michael Sherman

305

448-5898, ext. 213

ai

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

W 1113, 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 6/22/2011 and assigned
Florida document number L11000072617

This amendment is submitted to amend the following:

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

Granparaiso 4401, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"

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**)

14 NE 1ST AVENUE
10TH FLOOR
MIAMI, FLORIDA 33132

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

City, 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 605, 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

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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

100

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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 December 26, 2017

<i>Rodrigo Roman</i>	00000000000000000000 12/26/17 4:53PM EST HZEL-WYND-OV-JD JFGZ	<i>Leda Ramos</i>	00000000000000000000 12/26/17 5:11PM EST HZEL-WYND-OV-JD JFGZ
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RODRIGO ROMAN and LEDA F. RAMOS, as Managers of the LLC

Typed or printed name of signee

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Filing Fee: \$25.00