Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CALANDRINO LAW FIRM

Account Number : I20090000062

Phone Fax Number

: (407)601-4905 : (407)601-4910

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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പട്ടLLC AMND/RESTATE/CORRECT OR M/MG RESIGN TETO INVESTMENTS, LLC

Certificate of Status	0
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MAY 2 4 2013

B. KOHR

#627 P.002/005

## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT: TETO INVESTMENTS 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:

EURIBIADES CERRUD II, ESQ.

Name of Person

CALANDRINO LAW FIRM PA

Firm/Company

301 EAST PINE STREET, SUITE 950

Address

ORLANDO, FLORIDA 32801

City/State and Zip Code

EURI@FLORIDABUSINESSLAW.COM

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

For further information concerning this matter, please call:

EURIBIADES CERRUD II, ESQ.

at (407 )601-4905

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fec

☐\$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

TO BOTH

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## TETO INVESTMENTS 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 Liabil	ity Company were filed on 06/24.	ر 2011/2011 an Passigner
Florida document number L11000073755		
This amendment is submitted to amend the followir	ng:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company,	" the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>	
B. If amending the registered agent and/or r registered agent and/or the new registered office		records, enter the name of the new
Name of New Registered Agent:	N/A	
New Registered Office Address:	N/A .	
	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, 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
MGRM	DIEGO A. SAFIE-ZIMERI	1740 Brooks Lane	Add
		Oviedo, Florida 32765	Remove
MGRM	JOSE F. SAFIE	1740 Brooks Lane	✓ Add
		Oviedo, Florida 32765	Remove
MGR	ROSA I. SAFIE	1740 Brooks Lane	Add
		Oviedo, Florida 32765	Remove
MGRM ROSA I. SAFIE	ROSA I. SAFIE	1740 Brooks Lane	Add
		Oviedo, Florida 32765	Remove
			Add
		Remove	
			Add
			Remove

From: Calandrino Law Firm

407 601 4910 05/23/2013 08:45 #627 P.005/005

it am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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-	h professional and the second
d	<u>/S</u> OF APRIL, 2013
	Signature of a member or authorized representative of a member
	JOSE F. SAFIE
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00