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**EXAMINER** 



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SCORETARY OF STATE
ALL AHASSEF, FLORIDA

## **COVER LETTER**

TO:	Registration Sectorial Division of Corporate C					
SUBJE	CCT:	Cespedes	s Law Firm, LLC			
5000			ted Liability Company	<del></del>		
The enclosed Articles of Amendment and fee(s) are submitted for filing.						
Please	return all correspon	dence concerning this matter	to the following:			
		Ernes	sto F. Cespedes, Esquire			
			Name of Person			
			Firm/Company			
		597	70 SW 18th Street #117			
			Address			
		Boo	ca Raton, Florida 33433			
			City/State and Zip Code			
	efcmiami@gmail.com					
		E-mail address: (1	to be used for future annual report notifica	tion)		
For fur	ther information con	ncerning this matter, please c	all:			
	Ernesto F. (	Cespedes, Esquire	at ( 305 ) 74	<b>1</b> 1-0301		
	Name of	<u> </u>	Area Code & Daytime T			
Enclos	ed is a check for the	following amount:				
<b>✓</b> \$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy	\$60.00 Filing Fee, Certificate of Status &		
		Certificate of Status	(additional copy is enclosed)	Certified Copy		
				(additional copy is enclosed)		
		NG ADDRESS:	STREET/COURIE	R ADDRESS:		
		tion Section of Corporations	Registration Section Division of Corporati	ons		

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	pedes Law	Firm, LLC.cccc	n our records )	<del></del>		
(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 Lia Florida document number L0000780		were filed on	July 6th, 2011	and assigned		
This amendment is submitted to amend the follo	wing:					
A. If amending name, enter the new name of	the limited liab	ility company here:				
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ited Liability Company,	" the designation	"LLC" or the abbreviation		
Enter new principal offices address, if applicable:		2385 N.W. Executive Center Drive #100				
(Principal office address MUST BE A STREET	TADDR <u>ESS)</u>	Boca Raton, Flo	orida 33431	<u> </u>		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE I	<u>30X)</u>	5970 S.W. 18th Boca Raton, Flo		JUNII PH I: 11 AHASSEE, FLORIDA		
B. If amending the registered agent and/o registered agent and/or the new registered off			records, <u>enter</u>	-		
Name of New Registered Agent:	Ernesto F. Cespedes, Esquire					
New Registered Office Address:	5970 S.W. 18th St. #117  Enter Florida street address					
	B	oca Raton	, Florida _			
		City		Zip Code		
New Registered Agent's Signature, if changing R	egistered 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 Emesto F. Cespedes, Esq.

Page 1 of 2

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>	Address	Type of Action				
MGRM	Carlos A. Cespedes, Esq.	113 Almeria Avenue, 2nd Floor Coral Gables, Florida 33433	Add // Remove				
MGRM_	Ernesto F. Cespedes, Esq.	5970 S.W. 18th Street #117 Boca Raton, Florida 33433	<u>ſ</u> Add <sup>†</sup> ☐ Remove				
			Add Remove 				
			Add Remove				
			Add Remove 				
			Add Remove				
D. If amendin	g any other information, enter change(s	here: (Attach additional sheets, if necessary.)	_				
			_				
Dated	June 6th, 2012,	 					
_	Signature of a member of	authorized representative of a member					
Carlos A. Cespedes, Esq.  Typed partitioned name of signee							

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Filing Fee: \$25.00