111000079369

(Re	equestor's Name)	
(Ad	ldress)	<u></u>
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #	f)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
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11 SEP 12 PM 2: 29

SECRETARY OF STATE
SECRETARY OF STATE

T. HAMPTON
SEP 1 0 2011

EXAMINER

COVER LETTER

	Registration Sec Division of Corp				
SUBJECT	r.	SPAIN	TO YOU LLC		
SOBOLE	•	Name of Limi	ted Liability Company		_
The enclos	sed Articles of A	Amendment and fee(s) are sub	omitted for filing.		
Please retu	ırn all correspor	dence concerning this matter	to the following:		
		TOMAS VAZQUEZ			
			Name of Person		
			SPAIN TO YOU LLC		<u></u>
			Firm/Company	,	
		1018 F.	AIRFIELD MEADOW	/S DR.	·
			Address		
		,	WESTON, FL 33327		
			City/State and Zip Code		_
		F-mail address: (1	nfo@spaintoyou.com	port notification)	_
For further	r information co	ncerning this matter, please o		,	
	TOMA	S VAZQUEZ	at (954)	638-2053	
	Name of	Person	Area Code &	& Daytime Telephone Num	ber
Enclosed i	s a check for the	e following amount:			
\$25.00	Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is a	Certifi enclosed) Certifi	Filing Fee, icate of Status & ied Copy ional copy is enclosed)
	Registra	NG ADDRESS: tion Section of Corporations x 6327	Registratio	f Corporations	:

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

11 SEP 12 PH 2: 29

SPAIN TO YOU LLC SECRETARY OF STATE FLORIDA

(Name of the Limited Liability Company as it now appears of the Limited Liability Company)

(A Florida Limited Liability Company)

·			,
The Articles of Organization for this Limited Liability Company	were filed on	July 11, 2011	and assigned
Florida document numberL11000079369			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company h	ere:	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Com	pany," the designation "Ll	LC" or the abbreviation
Enter new principal offices address, if applicable:	N/A		
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>		
Enter new mailing address, if applicable:	N/A		
(Mailing address MAY BE A POST OFFICE BOX)			_
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, enter in	le name of the new
Name of New Registered Agent:			
New Registered Office Address:	r	Enter Florida street addr	
	E		ess
	City	, Florida	Zip Code
	CHy		enp cour

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>	Address	Type of Action			
MGR	CONCEPCION VEIGA	1018 FAIRFIELD MEADOWS DR WESTON, EL 33327	□ Add ☑ Remove 			
			Add 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.)				
		ALLAHA	FIL 11 SEP 12			
		יי רי רי	ED PH 2: 29			
Dated	August 23	 				
	Signature of a member or authorized representative of a member					
Tomas Vazquez Typed or printed name of signee						

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Filing Fee: \$25.00