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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	 -
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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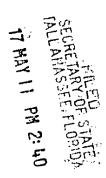
Office Use Only



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MAY 12 2017 S. YOUNG



COVER LETTER

TO: Registration Se Division of Cor	ction porations			•
	EXPOSITO L.L.C.			
SUBJECT:	Name of Lin	nited Liability Company		
			•	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	PEDRO V EXPOSITO			
		Name of Person		
		Firm/Company		
	8131 SW 35TH TERRAC	E		
		Address		
	MIAMI, FL 33155			
	PDD D 0 144 CT 0 14 C 0 0 14	City/State and Zip Code		是 要。
	PEDRO.VICTOR58@GMa	AIL.COM to be used for future annual report notification.	cation)	二等架
For further information co	oncerning this matter, please c		,	CRETARY OF STATES
PEDRO V. EXPOSITO		786 443-9589		5
Name of	Person	Area Code Daytime	Telephone Number	
Enclosed is a check for th	e following amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	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

SALVIDA EXPOSITO L.L.C.		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	nny as it now appears on our records.) Liability Company)	
he Articles of Organization for this Limited Liability Company lorida document number L11000080769	were filed on JULY 13,2011	and assigned
·		
nis amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
e new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the al	bbreviation "L.L.C."
nter new principal offices address, if applicable:		
rincipal office address MUST BE A STREET ADDRESS)		
	8131 S.W. 35TH TERRACE	PK
nter new mailing address, if applicable:	MIAMI, FL 33155	
failing address MAY BE A POST OFFICE BOX)	1411/411/10 33133	5
If amending the registered agent and/or registered o	ffice address on our records, enter	the name of the
gistered agent and/or the new registered office address her		
Name of New Registered Agent:	·	
New Registered Office Address:		
	Enter Florida street address	
	, Florida	-
	Citv	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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	lanager wthorized Member		
Title	<u>Name</u>	Address	Type of Action
			□ Add
			☐ Remove
			□ Change
·			Add
			□ Remove
			Orange F
			Change Change
			Remove To
			Remove To
			☐ Remove
			☐ Change
		-	
			Remove
		and the second s	☐ Change
			Add
			□ Remove
			□ Changa

_	ANY AND ALL LAWFUL BUSINESS	
-	ADD: ARTICLE III	
1	NURSING ASSISTANT AND RELATED ACTIVITIES	
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eff e:	ive date, if other than the date of filing:	i.0207 (i ed as tl
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies 90th day after the record is filed.	er of:
ed .	APRIL 25 2017	

Page 3 of 3

Filing Fee: \$25.00