LICO95284

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(A	ddress)	
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(C	ity/State/Zip/Phone	e #)
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SECRETARY OF STATE

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COVER LETTER

TO:

Registration Section

P.O. Box 6327 Tallahassee, FL 32314

Divis	ion of Cor	porations 🕶			
	CO. Penda	aLLC			
SUBJECT: _		Name of Lim	ited Liability Company		
		•			
The enclosed A	Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return a	II correspo	ndence concerning this matter	to the following:		
		EvaHurtado			
			Name of Person		
			Firm/Company		=1.0
		799Brickell Plaza,Suite6	08		第 产品
			Address		EEB .
		Miami, FL 33131			RSSEC, FLUE 26
			City/State and Zip Code		PH 8
		ehurtado@hpartnersgrou	•		8: 26
			o be used for future annual report ne	otification)	, , , , , , , , , , , , , , , , , , ,
For further info	ormation c	oncerning this matter, please ca	all:		
EvaHurtado			305 793-8808 at ()	3	
	Name o	f Person		ime Telephone Number	
Enclosed is a c	heck for th	ne following amount:			
□ \$25,00 Fil	ing Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Certificate Certified Co (additional co)	of Status &
	Registr Divisio	ING ADDRESS: ation Section on of Corporations ox 6327	STREET/COU Registration Sec Division of Corp Clifton Building	oorations	

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Torida document number L11000095284	were filed on August18,2011	and assigne	∍d
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
he new name must be distinguishable and contain the words "Limited Liabil	ity Company " the decimation "I I C" or the	abbreviation "L.C."	••
nter new principal offices address, if applicable:	799Brickell Plaza,Suite608	and contains	SE(
Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33131	E NA	
		23 (V	
nter new mailing address, if applicable:	799Brickell Plaza,Suite608	P III	
Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33131	26	0.60
			ومهنو
8. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here Name of New Registered Agent:	fice address on our records, <u>ente</u>	er the name of t	the_
egistered agent and/or the new registered office address here	fice address on our records, ente	er the name of t	the
Name of New Registered Agent:	<u>e</u> :		<u></u>

If Changing Registered Agent, Signature of New Registered Agent

C

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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	EduardoFalcon ————————————————————————————————————	799 Brickell Plaza, Suite 608, Miar	Add
			Remove
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			Dehange CRETA
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fective date, if other than the date of filing: (option of filing or more than 90 days after the date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after the date of filing or more than 90 days a	tional) ter filing.) Pursuant to 605.020
<u>ste:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, the cument's effective date on the Department of State's records.	his date will not be listed a
or same a creeking and on the separation of same a records.	
record specifies a delayed effective date, but not an effective time, at 12:01	a.m. on the earlier
The 90th day after the record is filed.	
Fabruar 02	
rted February23 2016	
1)	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00