

L11000098506

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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CLERK OF STATE  
TALLAHASSEE FLORIDA

APR 11 2014

J. BRUCE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **ROVI PROPERTIES, 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:

**DAVID RODRIGUEZ**

Name of Person

**ROVI PROPERTIES, LLC**

Firm/Company

**2901 W CYPRESS CREEK ROAD, SUITE 104**

Address

**FORT LAUDERDALE, FLORIDA 33309**

City/State and Zip Code

**david.rodriguez@roviproperties.com**

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

For further information concerning this matter, please call:

**DAVID RODRIGUEZ**

Name of Person

**305 469-0677**

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$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

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TALLAHASSEE, FL  
CLERK OF SUPERIOR COURT

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**ROVI PROPERTIES, 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 Liability Company were filed on 08/26/2011 and assigned  
Florida document number L11000098506.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

NA

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

2901 W CYPRESS CREEK ROAD, SUITE 104  
FORT LAUDERDALE, FLORIDA 33309

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

2901 W CYPRESS CREEK ROAD, SUITE 104  
FORT LAUDERDALE, FLORIDA 33309

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

NA

New Registered Office Address:

NA

Enter Florida street address

NA

City

Florida

NA

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**

**FILED**  
2011 APR -9 PM 2:59  
CLERK OF DISTRICT COURT  
HALL COUNTY  
FLORIDA

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	RODRIGUEZ, LUIS	200 SOUTH BISCAYNE BLVD., SUITE 2790	<input type="checkbox"/> Add
		MIAMI, FL 33131	<input checked="" type="checkbox"/> Remove
MGRM	RODRIGUEZ, DAVID L	200 SOUTH BISCAYNE BLVD., SUITE 2790	<input type="checkbox"/> Add
		MIAMI, FL 33131	<input checked="" type="checkbox"/> Remove
MGRM	RODRIGUEZ, LUIS	2901 W CYPRESS CREEK ROAD, SUITE 104	<input checked="" type="checkbox"/> Add
		FORT LAUDERDALE, FLORIDA 33309	<input type="checkbox"/> Remove
MGRM	RODRIGUEZ, DAVID L	2901 W CYPRESS CREEK ROAD, SUITE 104	<input checked="" type="checkbox"/> Add
		FORT LAUDERDALE, FLORIDA 33309	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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 2014 APR -9 PM 3:59  
 SECRETARY OF STATE  
 PALM BEACH, FLORIDA

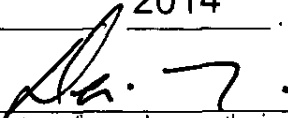
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

NA - ONLY CHANGE ADDRESS

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated APRIL 1 2014

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

DAVID RODRIGUEZ

\_\_\_\_\_  
Typed or printed name of signee

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Filing Fee: \$25.00

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TALLAHASSEE FLORIDA