

L11000115764

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

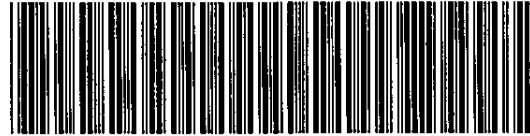
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 14 2013

T. HAMPTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Re/Max Sunny Isles, 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:

Helen Padron  
Name of Person

Re/Max Sunny Isles, LLC  
Firm/Company

17600 Collins Avenue  
Address

Sunny Isles Beach, FL 33160  
City/State and Zip Code

helenp@remax.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Helen Padron at (305) 384-6660 x5005  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

Re/Max Sunny Isles, 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 10/10/2011 and assigned  
Florida document number L 11000115764.

This amendment is submitted to amend the following:

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

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)**

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

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

**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:

Gisela Padron

New Registered Office Address:

17600 Collins Avenue

*Enter Florida street address*

Sunny Isles Beach, Florida

*City*

33160

*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.*

*X* Gisela Padron  
**If Changing Registered Agent, Signature of New Registered Agent**

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

| Title | Name                           | Address                     | Type of Action                             |
|-------|--------------------------------|-----------------------------|--|
| MGRM  | Jose' M. Padron                | 2500 Weston Road            | <input type="checkbox"/> Add               |
|       |                                | Suite 103                   | <input checked="" type="checkbox"/> Remove |
|       |                                | Weston, FL 33331            |  |
| MGR   | REMAX Premier Associates, P.A. | 2500 Weston Road            | <input type="checkbox"/> Add               |
|       |                                | Suite 103                   | <input checked="" type="checkbox"/> Remove |
|       |                                | Weston, FL 33331            |  |
| AMBR  | GIJELA PADRON                  | 17600 Collins Avenue        | <input checked="" type="checkbox"/> Add    |
|       |                                | Sunny Isles Beach, FL 33160 | <input type="checkbox"/> Remove            |
| AMBR  | BERNARDO BELLOSO               | 17600 Collins Avenue        | <input checked="" type="checkbox"/> Add    |
|       |                                | Sunny Isles Beach, FL 33160 | <input type="checkbox"/> Remove            |
|       |                                |                             | <input type="checkbox"/> Add               |
|       |                                |                             | <input checked="" type="checkbox"/> Remove |
|       |                                |                             | <input type="checkbox"/> Add               |
|       |                                |                             | <input checked="" type="checkbox"/> Remove |

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

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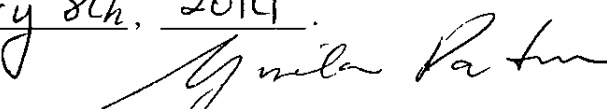
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated January 8th, 2014



Signature of a member or authorized representative of a member

GISELA PADRON

Typed or printed name of signee

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Filing Fee: \$25.00

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