

L11000117487

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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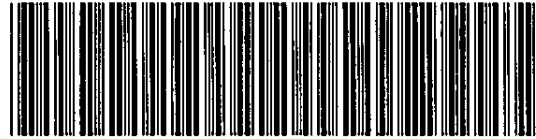
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
16 DEC 12 PM 4:15

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CANCUN RIVIERA MAYA CLUB E, 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:

RYAN PATTON, CPA

Name of Person

BARREAU PATTON CPAs LLC

Firm/Company

8374 MARKET STREET, #182

Address

LAKEWOOD RANCH, FL 34202

City/State and Zip Code

accounting@bpcpagroup.com

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

For further information concerning this matter, please call:

Ryan Patton

941

346-1575

at ()

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 &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

16 DEC 12 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

CANCUN RIVIERA MAYA CLUB E, 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 APRIL 29, 2016 and assigned
Florida document number L11000117487.

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 contain 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)

8374 MARKET STREET, #182

LAKEWOOD RANCH, FL 34202

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8374 MARKET STREET, #182

LAKEWOOD RANCH, FL 34202

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:

New Registered Office Address:

Enter Florida street address

, Florida

City

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 = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CANCUN RIVIERA MAYA CLUI	BLVD. KUKULKAN KM, 10 LTE	<input type="checkbox"/> Add
		CANCUN, MEXICO 77500	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DESARROLLADORA SUNSET L	BLVD. KUKULCAN KM, 10 LTE	<input checked="" type="checkbox"/> Add
		CANCUN, MEXICO 77500	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change


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16 DEC 12 PM 4:37

SECRETARY OF FLORIDA
FALL AHAUGS REC.
NO DEC 12 PM 4: 15

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) **Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated Nov. 29th, 2016


Signature of a member or authorized representative of a member

Typed or printed name of signee