

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ARM CONSULTING

Account Number: I20140000045

Phone : (786)286-5344

: (954) **300 - 1944** 3() スー Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LECANAT MIAMI LLC

Certificate of Status	1
Certified Copy	O
Page Count	01
Estimated Charge	\$30.00

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https://efile.sunbiz.org/scripts/efilcovr.exe

To: 18506176383 From: 19543021588 Date: 11/03/15 Time: 7:27 AM Page: 04/07

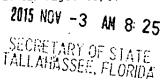
COVER LETTER

TO:	Registration So Division of Co			
SUBJ	ECT:			
		Name of Lim	ited Liability Company	
The er	iclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following.	
			Name of Person	
			Firm/Company	
			Address	
	·		City/State and Zip Code	
		E-mail address: (to be used for future annual report noti	fication)
For fu	rther information o	oncerning this matter, please co	all.	
	Name o	f Person	at () Area Code Daytim	e Telephone Number
	74amo g	7 7 6730N	, ned Code Bayum	o recognissic realises.
Enclos	sed is a check for th	ne following amount.		
□ \$2	5.00 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 To: 18506176383 From: 19543021588 Date: 11/03/15 Time: 7:27 AM Page! -05/07

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



LECANAT MIAMI LLC			
(Name of the Limited Liab (A Flor	oility Company as it now appears of the Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited Liability	Company were filed on	11/01/2011	and assigned
Florida document numberL11000124485	 ·		
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the li</u>	mited liability company here	;	
The new name must be distinguishable and contain the words "L	imited Liability Company," the desi	gnation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADI	DRESS)		
	<u> </u>		
Enter new mailing address, if applicable:	 		
(Mailing address MAY BE A POST OFFICE BOX)			
		_	
B. If amending the registered agent and/or registered agent and/or the new registered office ad		ur records, <u>enter</u>	the name of the
			
Name of New Registered Agent:			
New Registered Office Address:			
TOW REDENTION VILLOUT TAMESS.	Enter Florida	ı street address	
		, Florida	
	City		Zıp 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

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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>	Name	<u>Address</u>	Type of Action
MGR	NICOLAS SIMONE	140 Andalusia Way	
		Palm Beach Gardens, Fl 33418	Remove
			Change
MGR	RODRIGO RIBEIRO	140 Andalusia Way	
		Palm Beach Gardens, Fl 33418	Remove
			Change
MGR	ESTELA S OLIVER FURTADO	140 Andalusia Way	
		Palm Beach Gardens, Fl 33418	Remove
			☐ Change
			☐ Remove
			☐ Change
<u> </u>		•	
·			□ Remove
			☐ Change
		<u> </u>	□ Remove
			□ Change

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D. If am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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(If an ef <u>Note:</u>	tive date, if other than the date of filing:	3)(b) he
If the re (b) The	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.	
Dated		
	ETELLOIVE	
	Signature of a member or authorized representative of a member	
	ESTELA S OLIVER FURTADO	
	Typed or printed name of signee	

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Filing Fee: \$25.00