# 11000128056

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J. SAULSBERRY EXAMINER

APR 3 0 2013

### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT.

5701 Collins 1719 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:

# Manuel A. Rodriguez

Name of Person

Firm/Company

21121 SW 85th Avenue, Ste #203,

Address

CUTLER BAY, FL., 33189

City/State and Zip Code

manrod2@bellsouth.net

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

For further information concerning this matter, please call:

## Manuel A. Rodriguez

ູ,305、978**-29**12

Name of Person

Area Code & Davtime 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 Fce, 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

5701 COLLINS 1719 LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 11/09/2011 The Articles of Organization for this Limited Liability Company were filed on \_ and assigned Florida document number <u>L</u>11000128056 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 "LEC" 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: New Registered Office Address: Enter Florida street address

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 608, 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.

City

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jose Adrian Angeli	5701 Collins Ave.,	🚺 Add
		Apt. #1719,	Remove
		Miami Beach,FL., 3314	<u>0</u>
MGR	Emanuel Angeli-Piaggio	5701 Collins Ave.,	<b>✓</b> Add
		Apt. #1719,	Remove
		Miami Beach,FL., 33140	<u>0</u>
MGR	Maria Cecilia Angeli-Piaggio	5701 Collins Ave.,	Add
		Apt. #1719,	Remove
		Miami Beach, FL., 33140	)
			Add
			Remove
			2013)
			RAdd T
			Remove
			8:42
			Add
			Remove

If amer	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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ted	APRIL 22, 2013	
	Signature of a member or attthorized representative of a member  Juan J. Angeli - Operating Manager-Member	
	Typed or printed name of signee	

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Filing Fee: \$25.00

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