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SECRETARY OF STATE OF CORPORATIONS
DIVISION OF CORPORATIONS
2012 SEP 19 PM 12: 47

C. LEWIS

SEP 2 0 2012

EXAMINER

## **COVER LETTER**

r.

TO:	Registration : Division of C			÷	
-	D.C.T.	CORAZON	N DE MARIA, LLC		
SUBJI	ECT:		ited Liability Company		
		of Amendment and fee(s) are su pondence concerning this matte			
			MANUEL A. PEREZ		
			Name of Person		
		HARPER MEYER P	PEREZ HAGEN O'CONNOR ALBE	RT &	
	Firm/Company				
201 S BISCAYNE BLVD SUITE 800					
Address					
		M	IIAMI, FLORIDA 33131		
City/State and Zip Code				···	
		MPERE E-mail address:	EZ@HARPERMEYER.COM (to be used for future annual report notification)		
For fu	rther information	concerning this matter, please	call:		
		NUEL A. PEREZ	at (_305_)577-3		
	Name	e of Person	Area Code & Daytime Telepho	one Number	
Enclos	sed is a check for	r the following amount:			
<b>₹</b> \$2:	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 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		stration Section sion of Corporations Box 6327	STREET/COURIER AD Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE DIVISION OF CORPORATIONS

2012 SEP 19 PM 12: 47

CORAZO (Name of the Limited Liability (A Florida L	N DE MARIA, LLC Company as it now appear imited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Co. Florida document numberL1200004775		JAN 10 2012	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company her	<u>re</u> :	
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Compa	any," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	ESS)		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr		our records, <u>enter th</u>	e name of the nev
Name of New Registered Agent:	•		
New Registered Office Address:			
THE WITTERS AND THE PROPERTY OF THE PROPERTY O	Enter Florida street address		
	, Florida		
	City		Zip Code
New Registered Agent's Signature, if changing Registered	d Agent:		
I hereby accept the appointment as registered agent of the provisions of all statutes relative to the proper an			

If Changing Registered Agent, Signature of New Registered Agent

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.

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> Name <u>Address</u> Type of Action MGR CORAZON DE JESUS 201 S. BISCAYNE BLVD, SUITE 800 √ Add Remove CORPORATION MIAML FLORIDA 33131 MARISOL RODRIGUEZ MGR 201 S BISCAYNE BLVD SUITE 800 □ Add FREITAS Remove MIAMI, FLORIDA 33131 LUIS RENE SANCHEZ MGR 201 S BISCAYNE BLVD SUITE 800 ☐ Add NAVARRO MIAMI\_FI\_33131 ∇ Remove Add Remove Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) SEPTEMBER 14 Signature of a member or authorized representative of a member MANUEL A. PEREZ, AUTHORIZED SIGNOR OF CORAZON DE JESUS CORP GRATION

Typed or printed name of signee
Page 2 of 2

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