Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000257265 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : AGI REGISTERED AGENTS, INC.

Account Number : I20000000205

: (305)416-6800

Fax Number

: (305)416-6811

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

Email	Address:	1	

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EXAMINER

COVER LETTER

TO:	Registration S			(((H12000257265 3)))
	Division of Con	rporations		
SUBJE	CT:	Regia	Concordia, LLC	
			d Liability Company	
The enc	closed Articles of	Amendment and fee(s) are subm	nitted for filing.	
Please t	return all correspo	ondence concerning this matter to	the following:	,
		D	iane M. Hernandez	
			Name of Person	and the second s
			Firm/Company	
1000 Brickell Avenue, Suite 300				
			Address	
			iami, Florida 33131	
			City/State and Zip Code	
		dher E-mail address: (to	nandez@agilaw.com be used for future annual report noti	ification)
For furt	ther information (concerning this matter, please cal	l:	
	Diane	e M. Herandnez	at (305)	416-6800
~ 	Name o	of Person	at (<u>305)</u> Area Code & Daytin	ne Telephone Number
		the following amount:		
₹2 5.	.00 Filing Fec	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & d) 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

(((H12000257265 3)))

10/29/2012 14:40

3054166811

ARTICLES OF AMENDMENT (((H12000257265 3))) TO ARTICLES OF ORGANIZATION **OF**

Re (Name of the Limited Liab (A Flor	gia Concordia, LLC pility Company as it now appe ida Limited Liability Company	ars on our records.)
The Articles of Organization for this Limited Liabili Florida document number L1200001702	• • • • –	February 6, 2012 and assigned
This amendment is submitted to amend the followin A. If amending name, enter the new name of the	_	<u>ere</u> :
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Com	pany," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	•	
(Principal office address MUST BE A STREET A)	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		Inter Florida street address
	•	10, 100 11, 000 0000, 000
	City	, Florida 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 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.

(((H12000257265.3)))
If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

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: (((H12000257265 3)))

MGRM = N	lanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>P</u>	Ricardo Degwitz	5151 Collins Avenue Ant. 1621 Mlami Beach, FL 33140	Add Remove
<u>VP</u>	Alexander Degwitz .	5255 Collins Avenue Apt. 9H Miami Beach, FL 33140	Add Remove
<u>Mgr</u>	Elisa Castro	1101 SE 2nd Street Et. Lauderdale, EL 33301	Add Remove
and the second second			Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)	

			~ ~
Dated	October 25 . 201:	2 - authorized representative of a member + Manual	thre
	Signature of a member of	r authorized representative of a member + Mam.	ager
•		printed name of signee (((H1200025726	

Page 2 of 2

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