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(Requestor's Name)	
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B. BOSTICK

AUG 2 7 2013

EXAMINER

COVER LETTER

TO: Registration S Division of Co						
	A & SONS, LLC					
SUBJECT:	Name of Limit	ted Liability Company				
	Amendment and fee(s) are sub	-				
rease retain an corresp	Gabriel Ramos, MBA	to the following.				
		Name of Person		_		
	Ramos, Ramos & Comp	any				
	•	Firm/Company		-		
	8798 SW 8th Street, Suit	te 6				
		Address		- !!	2	
	Miami FL 33174			afici ALL/	ZOLI3 AUG	
	gabriel@ramosramosco.cor	City/State and Zip Code		TE INK	\U6 26	· · · · ·
1	E-mail address: (t	o be used for future annual report notificati	ion)	<u> </u>	P 34	<u>,</u> }
For further information of	concerning this matter, please c	all:		E. F. 1081	:2	{ <u></u>
Gabriel Ramos, MBA		305 220-2127		<u> </u>	<u></u>	
Name o	of Person	Area Code & Daytime To	elephone Numbe	er		
Enclosed is a check for t	the following amount:					
□ \$25.00 Filing Fee	S\$30.00 Filing Fee & Certificate of Status	☐S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	iling Fee, ate of Sta ed Copy onal copy	itus &	osed)

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

		& SONS, LLC	
(Name of the Limite	d Liability Company A Florida Limited Lial	as it now appears on our reco pility Company)	rds.)
The Articles of Organization for this Limited I	_iability Company w	ere filed on February 9, 2012	2 and assigned
Florida document number L12000019557	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liabili	ty company here:	
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited	Liability Company," the desig	nation "LLC" or the abbreviatio
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)	MI E A	
			2013
Enter new mailing address, if applicable:		•	ARC AUG
(Mailing address MAY BE A POST OFFICE	(BOX)		26 SSE 26
	•		Og. 7:
B. If amending the registered agent and registered agent and/or the new registered of		e address on our records,	enter the name of the nev
Name of New Registered Agent:	Giancarlo Far	inola	
New Registered Office Address:	10841 SW 32 St	reet	
		Enter Florida st	reet address
	Miami	. Flo	orida <u>33165</u>
	1	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 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 Changing Registered Agent, Signature of New Registered Agent

Page 1\of3

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGR	Onofrio Farinola	10841 SW 32 Street	Add
		Miami FL 33165	Remove
MGR	Mery Farinola	10841 SW 32 Street	- Add
		Miami FL 33165	Remove
		•	Add
			Remove
		ALLAH.	Add Add Remove
		ASSE E	Remove.
	· 		2: Add
			Remove
	**************************************		Add
		·	Remove

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Auxust 19. 2013.
Completed
1/1/16/19/19/

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Filing Fee: \$25.00

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