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:

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Account Number : 120100000009

Phone : (305)599-0839

Fax Number

: (305)592-9591

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

> LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DE LAS FLORES PROPERTY, LLC

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Corporate Filing Menu

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6/20/2013

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DE LAS FLORES PROPERTY, LLC

(Name of the Limited Lighility Company as it now appears on our records.)
(A Florida Limited Liability Company)

•				
The Articles of Organization for this Limited Liability	Company were filed on 3/28/2012	and assigned		
Florida document number L12000041428				
Piorida document number		en 🔛		
This amendment is submitted to amend the following:				
		王		
A. If amending name, enter the new name of the li	mited liability company here:	्र _{ुक्} 2		
		m-		
The new name must be distinguishable and end with the w	ords "Limited Liability Company," the designation "	LLC" or the abbreviation		
"L.L.C."	* * * * * * * * * * * * * * * * * * * *	L ORM		
Enter new principal offices address, if applicable:		مت الدنين		
(Principal office address MUST BE A STREET ADI	DRESS)			
Euter new mailing address, if applicable:				
• • • • • • • • • • • • • • • • • • • •				
(Mailing address MAY BE A POST OFFICE BOX)		·		
B. If amending the registered agent and/or reg		the name of the new		
registered agent and/or the new registered office ac	idress here:			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street ad	Enter Florida street address , Florida		
	. Florida			
	City	Zip Code		
New Registered Agent's Signature, if changing Register	rred Agent:	-		
Titer constitutes and a total sensing of the Stimute Line Leadings	- 47 (I 2 Miles)			

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

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> <u>T</u>	ype of Action
MGR	SERRAO, GERARDO J	9458 NW 47TH TERRACE	Add
		DORAL, FL 33178	Remove
			20 N
MGR	Escalante Serrao, Johanna M	4619 NW 96th Place	JAM 2
		DORAL, FL 33178	Remoye
			STATE OF THE STATE
MGR	SERRAO, TYRONE	9458 NW 47TH TERRACE	SINATE AND
		DORAL, FL 33178	Remove
			Add
			Remove
			Add
			Remove
			Add Add
			Remove

D. If ame	ending any other information, cuter change(s) here: (Attach additional sheets, if nacessary.)		•	
•				
Dated	June 20 - 20/3.	TALLAN	2013 基础	-Y1
	Signature of a member or authorized representative of a member	ASSEST OF	21	
	TYRONE SERRAO, MGRM Typed or printed fiame of signed		至	War war
	Page 3 of 3	95	©	
	Filing Fee: S25.00			