

L/2000054207

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

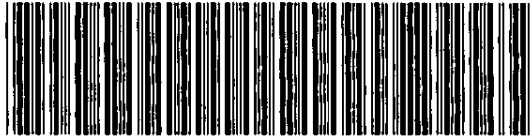
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:  
  
OCT 30 2014  
A. LUNT

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FILED  
2014 OCT 24 PM 3:03  
TALLAHASSEE, FLORIDA



**TO  
ARTICLES OF ORGANIZATION  
OF**

**Serenos La Seguridad LLC**

(Name of the Limited Liability 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 04/23/12 and assigned  
Florida document number L12000054207.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" 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: N/A

New Registered Office Address:

\_\_\_\_\_  
*Enter Florida street address*  
\_\_\_\_\_, **Florida** \_\_\_\_\_  
*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 605, 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**

**Authorized Member being added or removed from our records:**

MGR= Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Diogenes G. Hernandez	Urb. La Pradera Edif. Araguaney #45	<input type="checkbox"/> Add
		piso 1 Apto 2 San Joaquin	<input checked="" type="checkbox"/> Remove
		Estado Carabobo, Venezuela	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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RECEIVED  
OCT 24 2014  
M. LAHARDEE

N/A

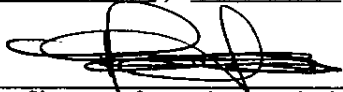
Four horizontal lines for additional information or notes.

**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

October 3 2014

Dated \_\_\_\_\_



Signature of a member or authorized representative of a member

Maigualida Torres

Typed or printed name of signee

FILED  
28th OCT 24 PM 3:04  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE FLORIDA