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	Registration Se Division of Co			
SUBJEC	3637-B,LL	.c.		
SUBJEC	I:	Name of Lim	ited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all correspo	ondence concerning this matter	to the following:	
			Name of Person	
		3637-B,LLC	•	
			Firm/Company	
		4301 South Flamingo Road	d, #103-183	
			Address	
		Davie, Fl 33330		
			City/State and Zip Code	
	,	lpatricio54@aol.com		
			to be used for future annual report notif	ication)
For furthe	r information o	concerning this matter, please ca	all:	
Lisette Pa	atricio		786 547-4603	
	Name o	of Person	Area Code Daytime	Telephone Number
Enclosed	is a check for t	he following amount:		
□ \$25.0	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 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

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

3637-B,LLC		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability (Florida document number L12000061079	Company were filed on May 7th, 2012	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or	
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADD	RESS)	16 DE T
		GF ST E E
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		-,`
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, <u>e</u> l <u>ress here</u> :	nter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	,	
	Enter Florida street address	
	, Florid	
	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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Lisette Patricio	4301 S. Flamingo Road #103-183 I	■ Add
			Remove
			☐ Change
MGR	Sylvia Martinez	4301 S. Flamingo Road #103-183,	Add
			■ Remove
			Discontinue To Add Att
			Add T
		·	Remove
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fan effe <u>Vote:</u> I	tive date, if other than the date of filing: [11-1-2016] [11-1-2016] [11-1-2016] [12-1-2016] [13-1-2016] [14-1-2016] [15-1-2016] [15-1-2016] [16-1-2016] [17-1-2016] [17-1-2016] [18-1-2016]	to 605.0207 be listed as
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	earlier o
ated _	November 23rd , 2016	
	X M/Mills I / 1) (4.0	
	Signature of a member of authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00