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:

Account Name : J L HOFMANN & ASSOCIATES, P.A.

Account Number : I19990000022 Phone

: (305)666-0024

Fax Number

: (305)666-0028

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SEGOVIA CONCEPTS, LLC

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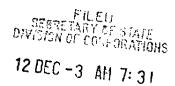
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https://efile.sunbiz.org/scripts/efilcovr.exe

11/30/2012

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ARTICLES OF AMENUMENT TO ARTICLES OF ORGANIZATION OF



Segovia Concepts, 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 May 29, 2012 and assigned Florida document number L12000071625
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviat "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 n registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address: Enter Florida street address
, Florida
Ony Zip Code New Registered Agent's Signature, if changing Registered Agent:
TOTAL TOTAL COLUMN A RESERVED TO ANTINGATE TOTAL CHARLES

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

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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>	Type of Action
MGR	Angel Berisiartu	420 S. Dixie Highway, Suite 48	Add Add
		Coral Gables, FL 33146	Remove
MGRM	Taft Street Partners, LLC	420 S. Dixie Highway, Suite 48	_ 3
-		Coral Gables, FL 33146	Remove
			Add Remove
			Add
			Remove
			Add Romove
			Add ·
			Remove SEGNETAL PARTIES AND ADDRESS OF THE PARTI
	Page H12	2 of 3 000281363 3	AH 7:3

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If amending any other informat	ion, enter change(s) here: (Attach additional sheets, if necessary.)
December 3	2012
	- 1)) (
Sign	ature of a member or authorized representative of a member
	John L. Hofmann
	Typed or printed name of signee

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Filing Fee: \$25.00

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