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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 : (850)878-5368 Fax Number

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 6100 SW 76TH STREET INVESTMENTS LLC

Certificate of Status	0
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Page Count	05
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COVER LETTER

TO:

Registration Section Division of Corporations

6100 SW 76th Street Investments LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and feets) are submitted for filling.

Please return all correspondence concerning this matter to the following:

Bryan Piterman
Nume of Person
Monte Nido Holdings, LLC
Firm/Company
27162 Sea Vista Drive
Address
Malibu, CA 90265
City/State and Zip Code
bryan@montenido.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nika B. Palama

Name of Person

Enclosed is a check for the following amount:

□ \$25.00 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 enclused)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clitton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

6100 SW 76th Stree		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L12000086674	were filed on July 2, 2012	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility comралу here:	
The new name must be distinguishable and end with the words "Limited Liab	nility Company," the designation "1.1.C" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
Enter new mailing address, if applicable:		P P Q
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		7.5
B. If umending the registered agent and/or registered o registered agent and/or the new registered office address her		name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	Chr. 2	Cur 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Kroviak, Vicki R.	6150 SW 76th Street	
		South Miami, FL 33143	Remove
MGR	Oliver, Wendy	6150 SW 76th Street	
		South Miami, FL 33143	≅ Remove
MGR	Monte Nido Holdings, LLC	27162 Sea Vista Drive	= Add
		Malibu, CA 90265	☐ Remove
DIR	Kroviak, Vicki R.	6150 SW 76th Street	
		South Miami, FL 33143	□ Remove
DIR	Oliver-Pyatt, Wendy F.	6150 SW 76th Street	2 VISION SECOND
		South Miami, FL 33143	Remove Co
CFO	Jon Garfield	27162 Sea Vista Drive	
		Malibu, CA 90265	Remove
•			

D.	If amending uny other information, enter change(s) here: (Attach additional sheets, if necessary.)			
Ξ.	Effective date, if other than the date of filing: (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)			
	Dated October 16 2014			
	Con Mafiles			
	Signature of a member or authorized representative of a member			
	Jon Garfield, CFO			
	Typed or printed name of signee			

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Filing Fee: \$25.00

SIVISION OF CORPORATIONS