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12 JUL 20 AH 10: 5

SECRETARY OF STATS DIVISION OF COMPORALISES

JUL 2 3 2012 T. HAMPTON

COVER LETTER

TO:	Registration Se Division of Cor				
SUBJE	ECT:	L.D.	T. 1808 LLC		
00001		Name of Lim	ited Liability Company		
The en	closed Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please	return all correspo	ondence concerning this matter	r to the following:		
			EDUARDO RUANO Name of Person	.	
			Name of Person		
		SERB	BER & ASSOCIATES, P.	٨.	
			Firm/Company		
	2875 NE 191 STREET, SUITE 801				
			Address		
		AVE	NTURA, FLORIDA 3318	0	
			City/State and Zip Code		
		ER@	SERBERLAWFIRM.COM to be used for future annual report in	A otification)	
For fur	ther information of	concerning this matter, please of	•	ottication	
	EDU	ARDO RUANO	at (305)	9326262	
		of Person	Area Code & Day	time Telephone Number	
Enclos	ed is a check for t	he following amount:			
\$25	.00 Filing Fec	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Regist Divisio P.O. B	JING ADDRESS: ration Section on of Corporations fox 6327 assec, FL 32314	STREET/COU Registration Se Division of Con Clifton Buildin 2661 Executive Tallahassee, FL	porations g : Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



12 JUL 20 AM 10: 57

	L.D.T 1808 LLC			
(<u>Name of the Limited L</u>	lability Company as it now appear forida Limited Liability Company)	rs on our records.)		
(2)	Torida Emilica Elability Company)			
The Articles of Organization for this Limited Liab	bility Company were filed on	7/10/2012	and assigned	
Florida document numberL120000897	⁷ 44 .			
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liability company her	<u>re</u> :		
	L.D.T 1618 LLC			
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compa	any," the designation "l	LLC" or the abbreviation	
Enter new principal offices address, if applical	ble:			
(Principal office address MUST BE A STREET	ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE B		T-10-1700		
William Control of the Control of th			18	
			·	
B. If amending the registered agent and/or	registered office address on o	our records, enter t	the name of the new	
registered agent and/or the new registered offi	ce address here:			
Name of New Registered Agent:				
New Benjatan 1000 A 11				
New Registered Office Address: Enter Florida street address				
Emer 1 to the street title ess				
	City	, Florida	Zip Code	
	City		гір Соае	

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 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 = Ma $MGRM = N$	nager Managing Member		
Title	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Rcmove
			Add Remove
			Add Remove
<u>.</u>			Add Remove
D. If amen	ding any other information, o	enter change(s) here: (Attach additional sheets, if necessary.)	
			SEGRET DIVISION 12 JUL 2
	Luly 40	0040	TARY OF STATE OF CORPORALS. 20 AM 10: 57
Dated	July 19		57
	Signature	e of a member or authorized representative of a member	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00