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COVER LETTER

TO: Registration Se Division of Cor			
1114	DOUGLAS, L	.LC	
SUBJECT:		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Tania Domii	nguez	
		Name of Person	
		Firm/Company	
	3634 Royal	Palm Ave.	201 TAI
		Address	
	Miami, FL 3	3133	2014 MAY 13 FM 1: 32 TALL AHASSEEL LOSALI miffication)
		City/State and Zip Code	
	tdominguez@cis	neros.com to be used for future annual report no	vification)
For further information c	oncerning this matter, please c	•	32
Tania Dom	inguez	_{at (} 305 ₎ 205-	7666
Name o	f Person		me Telephone Number
Enclosed is a check for the	ne 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 enclosed)
MAIL	ING ADDRESS:	STREET/COUR	RIER ADDRESS:

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1114	וחח	HGI	ΔS	11	\sim

(Name of the Limited Liability Company as it now appears on our records.)

	(11 1 Torrad Ellinea)	islability Company,	
The Articles of Organization for this Limited L Florida document number <u>L12000100785</u>	iability Company	were filed on 08/06/2	2012 and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	f the limited liab	oility company here:	
The new name must be distinguishable and end with the	words "Limited Liab	oility Company," the designat	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applie	cable:	3634 Royal Palm	ı Ave.
(Principal office address MUST BE A STREE	ET ADDRESS)	Miami, FL 33133	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and registered agent and/or the new registered of	or registered of		FI 1: 32
Name of New Registered Agent:	Tania O. D	ominguez	
New Registered Office Address:	3634 Roya	l Palm Ave.	
		Enter Florida stree	
	Miami		, Florida <u>33133</u>
		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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or</u>
Authorized Member being added or removed from <u>our records</u>:

MGR = Manager

AMBR = Authorized Member <u>Title</u> Name **Address Type of Action Tania Dominguez** 3634 Royal Palm Ave. **MGR ■** Add Miami, FL ☐ Remove □ Add □ Remove □ Add Remove _□ Remove □ Add _□ Remove □ Add □ Remove

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date this document is filed by the Flored May 12	orida Department of State)
date this document is filed by the Flored May 12	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00