## L12000101096

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(Address)				
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**EXAMINER** 



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09/06/12--01015--020 \*\*25.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

## COVER LETTER

TO: Registration Se Division of Con			
SUBJECT:	Lirio Blanco	o Inversiones LLC	
	Name of Limi	ted Liability Company	<del></del>
	Amendment and fee(s) are sub ondence concerning this matter	_	12 SEP-6 PAR 3: 50
Cynthia Perez			-6 Cor
		Name of Person	
Worldwid		Corporate Administrators LL	ر الا
Firm/Company			
2330 Ponce de Leon Blvd Suite 201			
		Address	
		oral Gables, FL 33134	
		City/State and Zip Code	
	E-mail address: (	to be used for future annual report notifica	tion)
For further information of	concerning this matter, please of	eall:	
		at ()Area Code & Daytime T	
Name of Person		Area Code & Daytime T	Celephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	We in proper		

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

Lirio	Blanco Inversiones LLO	•	<b>10 10 10 10 10 10 10 10</b>
	iability Company as it now appear lorida Limited Liability Company)		- So
(AF	forida Limited Liability Company)		के बुद्ध
The Articles of Organization for this Limited Liab	oility Company were filed on	08/06/2012	and assimed
Florida document numberL120001010	96		\$.50
This amendment is submitted to amend the follow	ring:		
A. If amending name, enter the new name of the	he limited liability company her	<u>·e</u> :	
The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicab	ile:		<u>.</u>
(Principal office address MUST BE A STREET.	ADDRESS)		
Enter new mailing address, if applicable:	- N		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:	Fr	iter Florida street add	ress
	Li		
	City	, Florida	Zin 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 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

A150 1. 350.

MGR = Manager

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:

MGRM = Managing Member Type of Action <u>Address</u> Name | Title MGR Julian Garcia Herrera 10022 NW 7th Street ☐ Add ✓ Remove Miami\_FL 33172 Oscar Garcia Herrera MGR 10022 NW 7t Street Remove Miami, FL 33172\_\_\_\_ ☐ Add Remove ☐ Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated September Typed or printed name of signee

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Filing Fee: \$25.00