# L12000106311

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SEP 1 3 2012

**EXAMINER** 



400239346864

09/11/12--01008--023 \*\*150.00



### **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT:		4 AVE, LLC	
	Name of Limite	ed Liability Company	
The enclosed Ar	rticles of Amendment and fee(s) are subr	nitted for filing.	2
Please return all	correspondence concerning this matter t	o the following:	# SEP 11
			SEP
	ن	OHN S. BOHATCH	
	· · · · · · · · · · · · · · · · · · ·	Name of Person	3
	CUTTENMACHE	D DOUATOU & DENIAD	
	GUTTENWAGHER	R, BOHATCH & PENARA Firm/Company	NADA, P.A.
•			1
	7301 SW	57TH COURT, SUITE 7	<u>6Ù</u>
•		Addross	
* * *	sol	JTH MIAMI, FL 33∜43	
		City/State and Zip Code	
•		1	
•		be used for future annual report not	ication)
For further infor	mation concerning this matter, please cal	II:	
•	JOHN S. BOHATCH	at ( 305 )	665-1040
	Name of Person		ne Telephone Number
•	•		
Enclosed is a che	eck for the following amount:		
\$25.00 Filing		\$55.00 Filing Fee &	\$60.00 Filing Fee,
	Certificate of Status	Certified Copy (additional copy is enclose	Certificate of Status &
•		(additional copy is enclose	(additional copy is enclosed)
•		, ,	
MAILING ADDRESS: Registration Section Division of Corporations		STREET/COUR	L L
		Registration Secti Division of Corpo	
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive C	enter Circle
		Tellahanna El 2	

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SEO 1 A 1.16

## 5040 E 4 AVE, 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 Li. Florida document number		were filed on	AUGUST 17, 2012	and assigned	
This amendment is submitted to amend the follo	wing:	•	·		
A. If amending name, enter the new name of	the limited liab	ility company her	<u>'e</u> :		
The new name must be distinguishable and end with "L.L.C."	1 the words "Limi	ted Liability Compa	any," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applica	5979 NW 151 ST, SUITE 232				
(Principal office address MUST BE A STREET ADDRESS)		MIAMI LAKES, FL 33014			
Enter new mailing address, if applicable:		5979 NW 151 ST, SUITE 232			
(Mailing address MAY BE A POST OFFICE BOX)		MIAMI LAKES, FL 33014			
B. If amending the registered agent and/o registered agent and/or the new registered off			our records, <u>enter th</u>	e name of the new	
Name of New Registered Agent:	JOAQUIN A	. CESPEDES,	JR.		
New Registered Office Address: 5979 NW 151 ST, SUITE 232				· · · · · · · · · · · · · · · · · · ·	
	,	En	ter Florida street addr	ess	
	MI/	AMI LAKES	, Florida	33014	
		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 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby donlirm 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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or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member <u>Title</u> <u>Name</u> **Address** Type of Action ☐ Add Remove ☐ Add Remove ☐ Add Remove Add Remove ∏Add: Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) SEPTEMBER 2012 Dated . Signature of a member or authorized representative of a member JOAQUIN À, CESPEDES, JR. Typed or printed name of signee

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

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Filing Fee: \$25.00