## 12000107487

3 <sub>p</sub> (	Requestor's Name)	
- <sup>-</sup> (	Address)	
	(Address)	· · ·
	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
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	(Document Number)	
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## **COVER LETTER**

TO: Registration Section
Division of Corporations

1791 1323 Seven Eagles Court 102 LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cesar Guercio

Name of Person

1791 Canada LLC

Firm/Company

619 Celebration AV

Address

Celebration , Florida, 34747

City/State and Zip Code

cesar guercio@1791.ca

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cesar Guercio

407 705-2024

Enclosed is a check for the following amount:

Name of Person

■ \$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)

**MAILING ADDRESS:** 

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

Area Code & Daytime Telephone Number

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

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

1791 1323 Seven Eagles Court 102 LLC

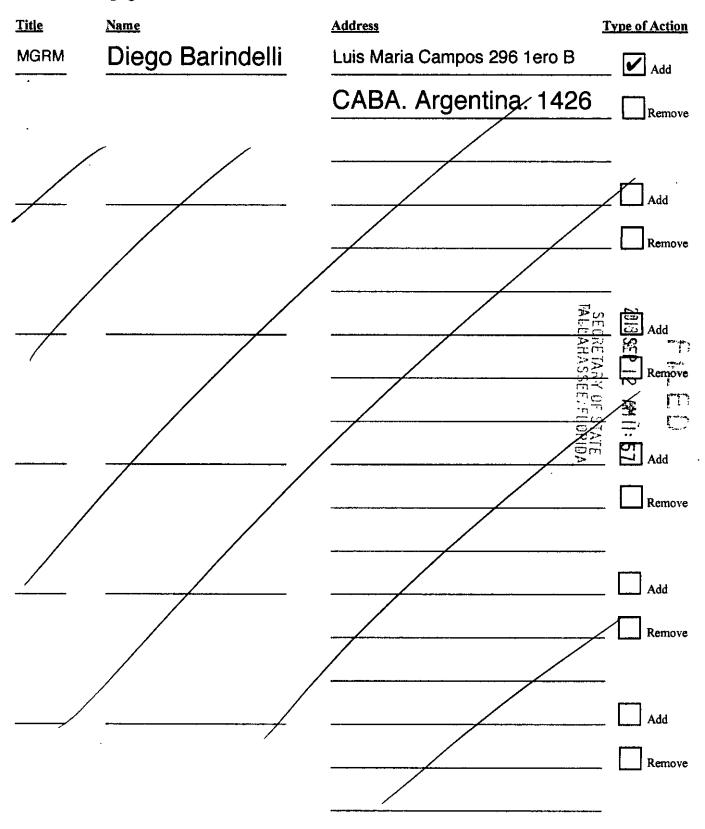
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Con	mpany were filed on 8/21/2012	and assigned
Florida document number L12000107487		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
The new name must be distinguishable and with the words "L.L.C."	"Limited Liability Company," the designation	201: 7AL
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRE	SSI /	SA - A
	<u> </u>	
		FSS E
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<del></del>
B. If amending the registered agent and/or register registered agent and/or the new registered office address		the name of the new
Mame of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered A	Agent:	
I hereby accept the appointment as registered agent and the provisions of all statutes relative to the proper and accept the obligations of my position as registered agen being filed to merely reflect a change in the registered company has been notified in writing of this change.	complete performance of my duties, and nt as provided for in Chapter 608, F.S. O	I am familiar with and r, if this document is
ī	If Changing Registered Agent, Signature of New	Registered Agent

Page 1 of 3

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 = Manager MGRM = Managing Member



•	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ř	
	<u> </u>
	- + 9 70B
d	September 1 (1)
	Signature of a member or authorized representative of a member
	Cesar Guercio, for 17/91 Canada LLC
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 SEP 12 MITH: 5: SEGRETARY OF STATE