

L12000115113

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

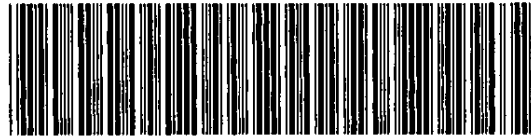
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

JAN 30 2013

D. BRUCE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Closet VIP 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:

JAIME CARDONA
Name of Person
Closet VIP LLC
Firm/Company
13601 SW 143rd Court Suite 104
Address
MIAMI, FL 33186
City/State and Zip Code
jcardona@closetvip.
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAIME CARDONA at (305) 842 0841
Name of Person Area Code & Daytime Telephone Number

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Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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

Closet VIP 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 Company were filed on Sept 7th / 2012 and assigned Florida document number L12000115113.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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 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 = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	GABRIEL F. GRULLON	13601 SW 143 th Ct SUITE 104 MIAMI, FL 33176	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	JOHN M. CAYCEDO	2428 SW 153 PLACE MIAMI, FL 33185	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	PABLO PALOMO	13601 SW 143 th Ct SUITE 104 MIAMI, FL 33176	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	JAIME ALBERTO CARDONA	13601 SW 143 th Ct SUITE 104 MIAMI, FL 33176	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	JAIME CARDONA	13601 SW 143 th Ct SUITE 104 MIAMI, FL 33176	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	IRENE GÓMEZ	13601 SW 143 th Ct SUITE 104 MIAMI, FL 33176	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

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TALLAHASSEE FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 1/25/13, _____

Signature of a member or authorized representative of a member

JULIAN GOMEZ
Typed or printed name of signee

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Filing Fee: \$25.00

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