Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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From:

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Account Number : 120080000090

Phone : (305)670-1991 : (305)670-1993

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ATHOS BRICKELL LLC

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ATHOS BRICKELL LLC		
(Name of the Limited	l Liability Company as it now appears on A Florida Limited Liability Company)	our records) - O O
The Articles of Organization for this Limited L Florida document number L1200011554	Liability Company were filed on 09/10	1/2012 and assigned
This amendment is submitted to amend the foll	lowing:	: 21 PRIB
A. If amending name, enter the new name o	of the limited liability company here:	**** · · · · · · · · · · · · · · · · ·
The new name must be distinguishable and end wi "L.L.C."	idi the words "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applic	cable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	BOX)	
B. If amending the registered agent and/ registered agent and/or the new registered o		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter i	Florida sireel address
	Enter i	Florida street address Florida

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

MGR = Manager

3056701993

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:

<u>Title</u>	<u>Name</u>	Address T	ype of Action
MGR	SILVINA DOMINGUEZ	9130 S. DADELAND BLVD	bbA 🔽
		SUITE 1509	Remove
		MIAMI, FL 33156	
			Add
			Remove
			-
	At the same to	20 Co.	Add
		PAR ARC SS	Remove
		ارت الد 	
		S.TAIC LONIDA	Add Add
		·	Remove
			Add Add
	·		Remove
			Add
			Removo

	·	
SEPTEMBER 5	2013	
	—, —, , , , , , , , , , , , , , , , , ,	
	Mondato	
Signature	of a particular authorized representative of a member	
	of a puriorized representative of a member	
Signature ALEJANDRO CUPI		75 25
Signature ALEJANDRO CUPI	of a printed name of signes	