412000122036

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

| · Division of Corporations | | | | |
|--|--|--|--|--|
| SUBJECT: ACRCM 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: | | | | |
| | | | | |
| Jacků Salazar | | | | |
| Name of Person | | | | |
| US Title & Escrow Toc. | | | | |
| 2715 E. Oakland Park Blud. | | | | |
| 5te 300 | | | | |
| Fort Lowderdale FL 33306 City/State and Zip Code | | | | |
| · | | | | |
| Jackie e ustitle. net E-mail address: (to be used for future annual report notification) | | | | |
| For further information concerning this matter, please call: | | | | |
| Jacki Salazar at (954) 568 9885 | | | | |
| Name of Person Area Code & Daytime Telephone Number | | | | |
| Enclosed is a check for the following amount: | | | | |
| \$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) | | | | |

TO:

Registration Section

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

| ACRCM I | LLC | |
|--|--|---|
| (<u>Name of the Limited Liabilit</u> (A Florida | y Company as it now appears on or Limited Liability Company) | ur records.) |
| The Articles of Organization for this Limited Liability of Florida document numberL\Z_OOO\Z_Z\O\36 | Company were filed on $\frac{9}{2}$ | 2012 and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the lin | nited liability company here: | |
| The new name must be distinguishable and end with the we "L.L.C." | ords "Limited Liability Company," th | e designation "LLC" or the abbreviation |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADD | RESS) | 20 ZO |
| | | |
| Enter new mailing address, if applicable: | | 23 P |
| (Mailing address MAY BE A POST OFFICE BOX) | | T C C C C C C C C C C C C C C C C C C C |
| | | 2037 |
| | | G0 |
| B. If amending the registered agent and/or registered agent and/or the new registered office ade | | cords, enter the name of the new |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Flo | orida street address |
| | | , Florida |
| | 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 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

| <u>Title</u> | Name | Address | Type of Action |
|--------------|------------------------|---------------------------------|----------------|
| MGRM | Irene Cecilia Gillitza | r 2801 NE 208 Terrace | Add |
| | | 2nd Floor | Remove |
| | | Aventura FL 33180 | |
| MGRM | Claus Gillitzer | 2801 NE 208th Terrace | Add |
| | | 2 nd Floor | Remove |
| | | Aventura Fl 33180 | |
| MGRM | Michael Gillitzer | 2801 NE 208 Terrace | Add |
| | | and Floor | Remove |
| | | Aventura FL 33180 | _ |
| MERM | Rolf Gillitzar | 2801 NE 208th Terrare | Add |
| | | 2nd FLOOR | Remove |
| | | Aventura, FL 33180 | _ |
| MER | Team Real Estate Most. | 2801 NE 208th Terrace | Add |
| | | 2rd FLOOR Aventura, FL 33180 | Remove |
| | | Aventura, FL 33180 | |
| | | | |
| | | 107 25 t 60 t 70 t | Remove |
| | | %a ™.7 • | PH S |
| | | 26.2 F9.2 | - |

| D. If an | nending any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
|----------|--|
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| : | |
| • | |
| | |
| | |
| Dated | 09/11/2013 |
| | Aucuita |
| | Signature of a member or authorized representative of a member |
| | JUAN ALEJANDRO GILLITZER Managing Member |
| | Typed or printed name of signee |
| | Page 3 of 3 |

Filing Fee: \$25.00

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