#/ 12000127136

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13 JUL 22 PH L LT

K.SALY EXAMINER JUL 23 2013

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

NEIGHBOORS 11481 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:

LUIS R. SMITH

Name of Person

JESSEL INVESTMENTS LLC

Firm/Company

11402 NW 41ST STREET SUITE 211

Address

DORAL , FL 33178

City/State and Zip Code

LM.JESSEL@GMAIL.COM

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

For further information concerning this matter, please call:

LUIS R. SMITH

_{..}305 (470-2429

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$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:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

13 JUL 22 PM 14:47

SEGNETARY OF STATE

FALLAHASSEE, FLORIDA:

NEIGHBOORS 11481 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 Florida document number <u>L12000127136</u> .	were filed on 10/04/20	012 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:	. ·	
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the	designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	, some of the		
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:	<u>.</u>		
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent:		ords, enter the name of the new	
No. Decision 1007 All			
New Registered Office Address:	Enter Flor	ida street address	
	, Florida		
	•	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre	ee to act in this capacity.	I further agree to comply with	

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
MGR	HECTOR F. ARELLANO	P.O BOX 52-1595	Add
		MIAMI, FL 33152	Remove
MGR	ESTHER NATALIA DE SOUSA	11481 NW 81ST LANE	Add
		DORAL FL 33178	Remove
·			
			Remove
			Add Remove
			_
			_ Add _ Remove

). If amending any other inform	mation, enter change(s) here: (Attach additional sheets, if necessary.)
	<u>'</u>
ated July, 12	2013
BAS /	Talie de Soris
- / 5	Signature of a member or authorized representative of a member
Esther Natalia	de Sousa
	Typed or printed name of signee

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Filing Fee: \$25.00