

L12000129054

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(Business Entity Name)

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2013 JUL -1 AM 10:00
TALLAHASSEE, FL 32304
CLERK OF COURT
JULY 1, 2013

J. SAULSBERRY
EXAMINER

JUL -2 2013

COVER LETTER

**TO: ,Registration Section
Division of Corporations**

SUBJECT: SCW REALTY, 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:

ANIBAL QUINTAO

Name of Person

EXPRESS ACCOUNTING AND INCOME TAX SERVICE CORP

Firm/Company

3927 N FEDERAL HWY

Address

POMPANO BEACH, FL 33441

City/State and Zip Code

ELIZABETH_FERREIRA@YMAIL.COM

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

For further information concerning this matter, please call:

ANIBAL QUINTAO

Name of Person

954 788-7400

at ()

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

2013 JUL -1 AM 10:00
FILED
TALLAHASSEE, FLORIDA
CLERK OF STATE

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

SCW REALTY, 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 10/09/2012 and assigned
Florida document number L12000129054.

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)

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	SAUL BERNARDINO PEDRO	4045 SHERIDAN AVENUE, SUITE 424	<input checked="" type="checkbox"/> Add
		MIAMI BEACH, FL 33140-3665	<input type="checkbox"/> Remove
MGR	RENATO MARTINHO PEDRO	4045 SHERIDAN AVENUE, SUITE 424	<input checked="" type="checkbox"/> Add
		MIAMI BEACH, FL 33140-3665	<input type="checkbox"/> Remove
MGRM	SANTA CRUZ WORLDWIDE, S.A.	4045 SHERIDAN AVENUE, SUITE 424	<input checked="" type="checkbox"/> Add
		MIAMI BEACH, FL 33140-3665	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

2013 JUL 1 9:50
 SEAL CITY OF FLORIDA
 TALLAHASSEE, FLORIDA

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

Dated 26 JUNE, 2013

Signature of a member or authorized representative of a member

Typed or printed name of signee

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Filing Fee: \$25.00

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CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED