

Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000198250 3)))



H130001982503ABC

	hit the REFRESH/RELOAD button on your browser from page. Doing so will generate another cover sheet.	this	13 CF	
To:	Division of Corporations Fax Number : (850)617-6383	ANNSSEE.	P-6 M	トニ・ドロ
From:	Account Name : GUZMAN & GUZMAN, P.A. Account Number : I20080000090	TOWN	8: 58	

Phone : (305)670-1991 Fax Number : (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 WAREHOUSE LLC

3 SEP -6 AM 10: 55
FUNE TANY OF STATE

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

K. SALY EXAMINER

SEP - 9 2013

Electronic Filing Menu

Corporate Filing Menu

Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



ATHOS WAREHOUSE LLC	
(Name of the Limited Liability Company as (A Ploride Umited Liability	it now appears on our records.) ty Company)
The Articles of Organization for this Limited Liability Company were Florida document number L12000130445	filed on 10/12/2012 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability of	company here:
The new name must be distinguishable and end with the words "Limited Li"L.L.C."	ability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
_	and the second s
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	·
B. If amending the registered agent and/or registered office a registered agent and/or the new registered office address here:	ddress on our records, enter the name of the new
Name of New Registered Agent.	
New Registered Office Address:	
	Enter Florida street address
·	, Florida
City New Registered Agent's Signature, if changing Registered Agent:	Zip Code

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

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:

MGRM = Managing Member Title Name Address Type of Action 9130 S. DADELAND BLVD MGR SILVINA DOMINGUEZ **SUITE 1509** Remove MIAMI, FL 33156 Remove Remove Remove

If amending any other information, ent	ter change(s) here: (Attach additional sheets, if necessary.)
SEPTEMBER 5	2013//
	Albrotito .
Signature of ALEJANDRO CUPI	a member authorized representative of a member
*	Typed or printed name of signed

Page 3 of 3