

U12 000133701

Florida Department of State
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.

((H13000219209 3)))



H130002192093ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : GUILLERMO RODRIGUEZ & ASSOCIATES, INC.
Account Number : I20050000147
Phone : (305) 649-7128
Fax Number : (305) 643-2905

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address:

taylorclixabeta@aol.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ROMADI LLC

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

FILED
2013 OCT -2 AM 8:35
RECEIVED
13 OCT -2 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

OCT - 3 2013

HelpCLINE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **ROMADI LLC**

Name of Limited Liability Company

((H 130002192093))

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

HECTOR TONANTE

Name of Person

ROMADI LLC

Firm/Company

247 SW 8TH STREET #891

Address

MIAMI, FL 33130

City/State and Zip Code

TAYLORELIXABETH@GMAIL.COM

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

2013 OCT -2 PM 8:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

HECTOR TONANTE

Name of Person

305 649-7123

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**

H 130002192093

ROMADI 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 10/19/2012 and assigned
Florida document number L12000133701

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

2013 OCT -2 PM 8:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

HECTOR TONANTE

New Registered Office Address:

247 SW 8TH STREET #891

Enter Florida street address

MIAMI,

Florida 33130

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.

Hector
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

H 13000219209 3

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	HECTOR TONANTE 50%	247 SW 8TH STREET #891 MIAMI, FL 33130 247 SW 8TH STREET #891	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	PATRICIA ROSA CACACE DE TONANTE 50%	MIAMI, FL 33130	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	BORTOLOTTI, ROBERTO A	247 SW 8TH STREET #891 MIAMI, FL 33130	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	SPINETTO, MIRTA C	247 SW 8TH STREET #891 MIAMI, FL 33130	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	BORTOLOTTI, ROMINA E	247 SW 8TH STREET #891 MIAMI, FL 33130	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	BORTOLOTTI, MARINA P	247 SW 8TH STREET #891 MIAMI, FL 33130	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *H13000219209 3* (Attach additional sheets, if necessary.)

Please remove the MGRM:BORTOLOTTI, DIANA M

247 SW 8TH STREET #891 MIAMI, FL 33130

Dated October 02 2013

Hector T

Signature of a member or authorized representative of a member

HECTOR TONANTE

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

2013 OCT -2 PM 4:35
SECRETARY OF STATE
PALM BEACH, FLORIDA

FILED