# 112000133739

(Re	questor's Name)	
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SECRETARY OF STATE

L'ALEGIM.

#### **COVER LETTER**

	Division of Cor	porations				
SUBJ		Properties, LLC				
OCDG		Name of Limi	ited Liability Company			
The er	nclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.			
Please	e return all correspo	ndence concerning this matter	to the following:			•
		Edgard Zambrano, MBA				
Name of Person						
		The Genesis Firm LLC				
			Firm/Company			
2500 NW 79th Avenue STE 169						
			Address			
		Doral, Fl. 33122				
	City/State and Zip Code			•		
		ed@thegenesisfirmllc.com				
			to be used for future annual repo	ort notification)		
For fu	rther information co	oncerning this matter, please ca	all:		ALLE OFFICE	77
Edgar	rd Zambrano, MBA		786 401-7	741	哥哥	
	Name of	f Person	Area Code	Daytime Telephone Number	2016 APR 12 P 1: 27 SECRETARY OF STATE TALLAHASSEE, FLORING	
Enclos	sed is a check for th	ne following amount:			ELSTA F.	
<b>□</b> \$2	25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified	te of Status &	

MAILING ADDRESS:

**Registration Section** 

TO:

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

•			
(Name of the Limi	ted Liability Company as (A Florida Limited Liabili	<u>it now appears on our rec</u> ly Company)	ords.)
	• • •	filed on 10/22/12	and assigned
nis amendment is submitted to amend the following:  If amending name, enter the new name of the limited liability company here:  e new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" after new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Emer Florida street address  Doral  Florida  Florida			
	. If amending name, enter the new name of	f the limited liability	company here:
ne new name must be distinguishable and contain the	words "Limited Liability Co	ompany," the designation "L	LLC" or the abbreviation "L.L.C."
nter new principal offices address, if appli	cable:		
Principal office address MUST BE A STREE	ET ADDRESS)		7. 2
			7.7
nter new mailing address, if applicable:	_		SSE 2 m
<u> Mailing address MAY BE A POST OFFICE</u>	end the following:  ew name of the limited liability company here:  contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."  ss, if applicable:  EA STREET ADDRESS)  licable:  COFFICE BOX)  Regent and/or registered office address on our records, enter the name of the new egistered office address here:  Agent:  Check Florida street address  Doral  Florida		
			55 =
			ST 1
<ul> <li>If amending the registered agent and egistered agent and/or the new registered a</li> </ul>	iability Company were filed on 10/22/12 and assigned  owing:  f the limited liability company here:  vords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."  rable:  ET ADDRESS)  For registered office address on our records, enter the name of the new office address here:  Enter Florida street address  Doral  Florida		
giotered agent and/or the new registered to	mee address here.		
Name of New Registered Agent:			
			· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and registered agent and/or the new registered o		Entar Florida stroat ad	dvasv
	Domi		
	·	City .	FloridaZiv 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager ' AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Emilia Gonzalez	275 Fountainebleau blvd STE 154	
		Miami, FL 33172	■ Remove
			☐ Change
AMBR	Juan O Martin	275 Fountainebleau blvd STE 154	Add
		Miami, FL 33172	_ ■ Remove
			☐ Change
MGRM	Angel V Avila	275 Fountainebleau blvd STE 154	Add
		Miami, FL 33172	■ Remove
			五日.Cheege
AMBR	Angel V Avila	275 Fountainebleau blvd STE 154	<u> </u>
		Miami, FL 33172	Add A
			Etianges
MGR	Juan O Martin	275 Fountainebleau blvd STE 154	■ Add
		Miami, FL 33172	□ Remove
			☐ Change
MGR	Emilia Gonzalez	275 Fountainebleau blvd STE 154	<b>=</b> Add
		Miami, FL 33172	☐ Remove
			☐ Change

Ownership Ir	nterest set as follows:	
Alberto Cabr	rera 60 % ownership interest.	
Angel V Avi	la 40 % ownership interest.	
	70 Z	·
	TALL PHE	5
	2,77	2/2
ective date, if o	other than the date of filing:(optional)	U
effective date is 1	listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60: nserted in this block does not meet the applicable statutory filing requirements, this date will not beilist	.020 ed a
ument's effective	ve date on the Department of State's records.	701
record specif	fies a delayed effective date, but not an effective time, at 12:01 a.m. on the earli	or (
he 90th day	after the record is filed.	<b>Ξ1 </b>
April 08th	2016/	
ed		
	// ////	

Page 3 of 3

Filing Fee: \$25.00