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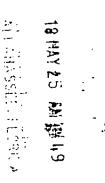
(Requestor's Name)
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(Business Entity Name)
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COVER LETTER

TO:	Registration Se Division of Cor			
		CARMEL	Y LLC	
SUBJI	ECT:	Name of Lim	ited Liability Company	
The en	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		CAROLINA GADALA M	ARATOS	
			Name of Person	
		CARMELY LLC		
			Firm/Company	
		8300 SW 152 STREET		
			Address	
		PALMETTO BAY, FLOR	IDA 33157	
			City/State and Zip Code	
		CAROM77@HOTMAIL.C		
F "	.1 (p		to be used for future annual report notifi	cation)
ror lui	rther information c	concerning this matter, please ca	a11:	
CAROLINA GADALA MARATOS			305 710-2351 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclos	sed is a check for th	he following amount:		
■ \$2	5.00 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

CARMELY LLC		
(Name of the Limited Liability Compa (A Florida Limited)	nny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on OCTOBER 30-2012	and assigned
Florida document number L12000137691		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
CAROLINA GADALA MARATOS LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:	8300 SW 152 STREET	
(Principal office address MUST BE A STREET ADDRESS)	PALMETTO BAY, FL 33157	
Enter new mailing address, if applicable:	8300 SW 152 STREET	
(Mailing address MAY BE A POST OFFICE BOX)	PALMETTO BAY, FL 33157	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:	·	the name of the
	, Florida	
	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 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 = N $AMBR = A$	lanager authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			Change
			Add
			□ Remove
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ctive date, if other than the	date of filing:	1	(optional)	
effective date is listed, the date mus	the specific and cannot be prior to da	ite of filing or more than 90 day	s after filing.) Pursuan	t to 605.0
in the date inserted in this bid iment's effective date on the Do	ock does not meet the applicable epartment of State's records.	statutory tring requirement	s, this date will not	be fisica
ecord specifies a delayed se 90th day after the rec	l effective date, but not ar ord is filed.	n effective time, at 12	:01 a.m. on the	earlier
d MAY 22ND	2018			
	Pakadina			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00