## L12000149006

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C. LEWIS

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EXAMINER

## **COVER LETTER**

TO: Registration, Se Division of Cor		54 - 1 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5	· · · · · · · · · · · · · · · · · · ·	
SUBJECT: KENI	DALL 6225, LL	_C		
SUBJECT:		ed Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Susana De [	Duenas		
		Name of Person		
		•		
		Firm/Company		
	4235 SW 96	th Avenue		
		Address		
•	Miami, Florid	da 33165		
		City/State and Zip Code		
	E-mail address: (1	o be used for future annual report not	ilication)	
For further information concerning this matter, please call:				
Susana de	Duenas	305 <sub>,</sub> 807-6	098	
Name o	f Person	Area Code & Dayti	ne Telephone Number	
Enclosed is a check for the	ne following amount:			
<b>■</b> \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy	□\$60.00 Filing Fee. Certificate of Status &	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Fl. 32301

(additional copy is enclosed)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

13 JUN 24 AM 10: 37

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company has been notified in writing of this change.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

``		- Novo	mher 28, 2012
The Articles of Organization for this Limited L Florida document number L12000149006	iability Company	were filed on 14046	mber 28, 2012 and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
The new name must be distinguishable and end win'L.L.C."	th the words "Limi	ted Liability Company	"the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		4235 SW 96th Avenue	
(Principal office address MUST BE A STREET ADDRESS)		Miami, Florida 33165	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		4235 SW 96th Avenue	
		Miami, Florida 33165	
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:		<u>e</u> :	r records, enter the name of the new
New Registered Office Address:	4235 SW 96th Avenue  Enter Florida street address		
	Miami		Florida 33165
		City	. Florida 33165 Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as register the provisions of all statutes relative to the accept the obligations of my position as reg	proper and comp	olete performance of	my duties, and I am familiar with and

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

being filed to merely reflect a change in the registered office address. I hereby gonfirm that the limited liability

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 = Ma MGRM = M	nager 1anaging Member	FILED `	
<u>Title</u>	<u>Name</u>	13 JUN 24 AM 10: 37	Type of Action
MGR	Yilian Varela	5338 Wolfins Awanue	Add
		Number 905	Remove
		Miami Beach, FI 33140	<del></del>
MGR	Susana de Duenas	4235 SW 96th Avenue	Add
		Miami, Florida 33165	Remove
MGR	Adriel Perez	2391 SW 139 Place	
		Miami, Florida 33175	Remove
MGR	Antonio Perez	5333 Collins Avenue	Add
		Number 905	Remove
		Miami Beach, Fl 33140	_
			Add
			Remove
			_
			Add
			Remove

_		BILED
-		13 JUN 24 AM 10: 37 SECRETARY OF STATE TALLAHASSEE, FLORIDA
Pated	Signature of a namber or authorized representative of a member	
	Susana De Duenas	A
	Typed or printed name of signee	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Page 3 of 3	
	Filing Fee: \$25.00	