#112000152630

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	: #)
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(Do	ocument Number)	
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K.SALY EXAMINER JAN - 4 2013

COVER LETTER

TO:

Registration Section

Division of Co	rporations		
SUBJECT:		ATIVI LLC	
•	Name of Limit	ted Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	ALEJA	·	MGR
		Name of Person	
		MIRATIVI LLC	
		Firm/Company	-
	17071 W	V Dixie Highway suite	#124
		Address	
	NORTH	H MIAMI BEACH, FL 3	3160
		City/State and Zip Code	
	ntic	capitalpm@gmail:com	e de la companya de La companya de la co
	E-mail address: (to	o be used for future annual repo	rt notification)
For further information of	concerning this matter, please ca	all:	ı
Δ1 Ε ΙΔΝ!	DRO J. WELSH	796	454-8183
	of Person	at (786) Area Code & I	Daytime Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	\$60.00 Fiting Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations Box 6327 assee, FL 32314	Registration Division of C Clifton Build	Corporations ling ive Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

12 050	FILED
THE PARTY.	31 AH 9: 03
ur records.)	AH 9: 03

MIRATIVI LLC

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

(A Florida Limited Liability Company)

(71 form	a Banaca Babanay Compan	(4)	
The Articles of Organization for this Limited Liability Florida document number	y Company were filed on _	December 6, 2012	_ and assigned
Tiorida document number	 '		
This amendment is submitted to amend the following	;		
A. If amending name, enter the new name of the l	imited liability company	<u>here</u> :	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Con	mpany," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office a		n our records, <u>enter the</u>	name of the new
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:			
		Enter Florida street addre	ss
	·	, 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 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

Title .	<u>Name</u>	<u>Address</u>	Type of Action
MGR :	LILIANA M. BELTRAN		Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
·			Add Remove
D. If amen	ding any other information, ent	ter change(s) here: (Attach additional sheets, if necessary.)	_
. —			
	DECEMBER 29	(20kg	_
Dated	Sighter of	2012 member of authorized representative of a member	·
		ALEJANDRO J. WELSH Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00