# L12000155383

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T. HARLING.

#### COVER LETTER

TO:

Registration Section **Division of Corporations** 

# INVERSIONES SOUTH BEACH LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

## EDUARDO RUANO

Name of Person

# SERBER & ASSOCIATES, P.A.

Firm/Company

## 2875 NE 191 STREET, SUITE 801

Address

## **AVENTURA FL 33180**

City/State and Zip Code

## ER@SERBERLAWFIRM.COM

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

For further information concerning this matter, please call:

## EDUARDO RUANO

 $_{at}(305)9326262$ 

Name of Person

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

### INVERSIONES SOUTH BEACH 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 12/12/2012	and assigned
Florida document number <u>L12000155383</u>		<b>3</b> 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	5 <del>数</del>
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Company," the designation	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	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 ade		er the name of the new
Name of New Registered Agent:		
New Registered Office Address:		-
	Enter Florida street	address
	, 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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Treo Development Group LLC	6065 NW 167th Street	Add
		Unit B-11	Remove
		Miami FI 33015	
MGR	Administraciones South Beach LLC	6065 NW 167th Street	Add
		Unit B-11	Remove
		Miami Fl 33015	
			Add
			Remove
			Add Remove
			Add  Remove
			Remove

f amending any other informati	on, enter change(s) here: (Attach additional sheets, if necessary.)
T	
***************************************	
March 04	2013
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Signa	ature of a member or authorized representative of a member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00