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(Re	equestor's Name)	<u></u>
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates of	f Status
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2016 MAR 24 FM 3: 48

K.SALY EXAMINER MAR 25

COVER LETTER

Div	ision of Corp	orations		
SUBJECT:	Alberdi Ybo	or LLC	•	
		Name of Limi	ited Liability Company	
The analogo	l Artialas af A	smandmant and facts) are miles	mined for films	
The enclosed	I Articles of A	amendment and fee(s) are sub	mitted for ming.	
Please return	all correspon	dence concerning this matter	to the following:	
		Peter Daniel Alberdi Jr	Name of Person Firm/Company Address City/State and Zip Code	
			Name of Person	
			Firm/Company	
710 S. Davis Blvd				
			Address	
		Tampa, FL 33606		
			City/State and Zip Code	
		alberdip@aol.com		
		E-mail address: (t	to be used for future annual report notific	ation)
For further in	nformation co	ncerning this matter, please ca	all:	
Peter Danie	el Alberdi Jr		at ()	
	Name of	Person	Area Code Daytime T	elephone Number
Enclosed is a	check for the	e following amount:		
\$25.00 F	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS:

TO:

Registration Section

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**

2016 HAD
11417 D
2016 MAR 24 PM 3: 48
- 1000 CM 5 %

Alberdi Ybor LLC

(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ay as it now appear iability Company)	ars on our record	17. 2017_
	<u> </u>	ecomber	
The Articles of Organization for this Limited Liability Company	WOLCH THEOLOGIC		and assigned
Florida document number 46-1671587 *L12000157531	0		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company l	<u>nere</u> :	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the	designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:			· · · · · · · · · · · · · · · · · · ·
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			
B. If amending the registered agent and/or registered of		n our record	s, enter the name of the nev
registered agent and/or the new registered office address here			
Name of Name Danistana I Associa			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flo	orida street addre:	SS .
··· = ··· · · · · · · · · · · · · · · ·		, Fl	orida
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre			
provisions of all statutes relative to the proper and complete	performance o	f my duties, ai	nd 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
MGR	Peter Daniel Alberdi Jr	710 S Davis Blvd, Tampa, FL 3360 6	Add
			□ Remove
			Change
			
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Teter Samul Alburdich			earlier of:
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Signature of a member or authorized representative of a member	Dated	Peter Samul Alludi Ch	
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00